

Personal Automobile Questionnaire



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(214) 823-3003

Sheaner Insurance Agency
for the best Coverage, Price & Service ...

Home, Auto, Boat, Motorcycle or Business

Whatever your situation, we'll help you make the right decisions to achieve your goals.

Sheaner Insurance is a family owned business with over 57 years experience. It would be our pleasure to serve you.

"Have the protection you need; Call today for a full review of your insurance program."

www.SheanerInsurance.com

CONTACT INFORMATION

First Name Last Name

Address

City State Zip

E-mail

Phone

Requested Effective Date: Current Carrier

VEHICLE INFORMATION

Vehicle #1	VIN Number			
Year	Make	Model		Use
Vehicle #2	VIN Number			
Year	Make	Model		Use
Vehicle #3	VIN Number			
Year	Make	Model		Use
Vehicle #4	VIN Number			
Year	Make	Model		Use

Are any vehicles Leased? No Yes

DRIVER INFORMATION

Driver 1	Name		Marital Status	
	Date of Birth	Drivers License #		State
Driver 2	Name		Marital Status	
	Date of Birth	Drivers License #		State
Driver 3	Name		Marital Status	
	Date of Birth	Drivers License #		State
Driver 4	Name		Marital Status	
	Date of Birth	Drivers License #		State

Insurance Declined, Cancelled or Non-Renewed in last three (3) years?	No	Yes
Have all drivers been licensed five years or more?	Yes	No
Has there been a Personal Auto Policy in force continuously for the past Six (6) months?	Yes	No

TICKETS / ACCIDENTS / CLAIMS / LOSS HISTORY - FIVE (5) YEARS

Tickets	No	Accidents	No	DWI/ SR22	No	Other Losses	No
	Yes		Yes		Yes		Yes

If Yes, provide the Date of Loss, Description of Loss, Amount Paid, Driver and Vehicle information for last five (5) years

Description

COVERAGE OPTIONS

Liability

Uninsured Motorist	Yes	No	Personal Injury	Yes	No
Collision	Yes	No	Deductible		
Comprehensive	Yes	No	Deductible		

Select Coverages for Vehicles:

Vehicle #1	Collision	Comprehensive	Towing	Rental Cost
Vehicle #2	Collision	Comprehensive	Towing	Rental Cost
Vehicle #3	Collision	Comprehensive	Towing	Rental Cost
Vehicle #4	Collision	Comprehensive	Towing	Rental Cost

Additional
Information

Return completed form by e-mail or fax to (888) 607-7154