

BASIC APPLICATION

AUTOMOBILE



941-723-1400

fax 941-723-1440

sales@heritagefla.com



Thank you for your interest in the Insurance products that are being offered by Heritage Insurance Services.

In order to effectively evaluate your coverage and premium needs, we will need you to provide the following information:

- Completed Basic Application
- Insurance requirements (if any) from your builders and/or suppliers (ie financial strength, endorsements, etc)
- Loss Runs from your current Insurance Provider (the past 5 years)*
* if you do not have your current loss history information (above), please complete the loss runs release (attached) and include a copy of your current declarations page (this page will include your policy number, insurance company, limits, and premium)

Please return the information via fax 941-723-1440 or e-mail (sales@heritagefla.com) .

Once we have obtained all required information , your information will be forwarded to multiple underwriters. A summarized insurance proposal will be prepared as quickly as possible (normally about a week to ten days).

Please do not hesitate to call 941-723-1400 with any questions.

Dave A. Clements
Principal Agent

Basic AUTOMOBILE Application

Business Name: _____

Address: _____

Phone: _____ Cell: _____

VEHICLES (Year/ Make/ Model)	VIN (Identification Number)	Zip Code*	Stated Value**
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

* Zip Code where vehicles are parked overnight ** Stated Value of the vehicles

DRIVERS (Name/ Date of Birth/ Drivers License/ Marital Status)

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.

Current Insurance Company _____

Current Policy Number: _____ Expiration Date: _____

Current/ Requested Limits: _____

Any Auto Losses within the last 5 years _____ (if yes, please attach detailed list)

YOUR LETTERHEAD

INSURANCE COMPANY: _____

RE: POLICY # _____

This letter authorizes you to release any of our rating or loss history (loss runs) information to fax number 941-723-1440.

Any questions, please call the undersigned at _____

Sincerely,

Signature

Title

Date

Please find a copy of my declarations page or certificate of insurance attached.