

Norris Insurance Auto / Cycle Quote Sheet

Date _____

1008

Name _____

Phone _____

Married? _____ Spouse _____

Cell _____

Address _____

City, State, Zip _____

email _____

Requested effective date _____

Notify we will get financial score

Current Insurance Carrier _____

Bankruptcy? _____

If no insurance, when expired _____

Previous Liability Limits _____

Drivers

Name	SSN	Driver's License	DOB	Student Y/N	Vehicle Assign
1					
2					
3					
4					
5					

If Student(s) - Drivers Training? - Good Students? - Away at College > 100 Miles without car?

Any tickets, accidents or suspensions for anyone? (in last 5 years)

Vehicles

Year, Make & Model	VIN	CC	Usage	Miles to Work	Loan Lease
1					
2					
3					
4					
5					

Physical Damage and Other Coverages

	Comp	Coll	Towing	ERS	Full Glass	Gap Coverage
1						
2						
3						
4						
5						

Any vehicles not titled to named insured/spouse?

Any drivers in home not listed? How insured?

If Cycle Quote - Motorcycle Endorsement on DL? - Extra Equipment? - Safety Class? - Cycle Club? - Riding Season?