

**DAIGLE & ASSOCIATES**

*QUICK QUOTE QUESTIONNAIRE* DATE \_\_\_\_\_

AGENCY \_\_\_\_\_ PHONE # \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ FAX # \_\_\_\_\_ email address \_\_\_\_\_

INSURED \_\_\_\_\_ EX-DATE \_\_\_\_\_

NAMES OF PRINCIPALS \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

ADDRESS \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_ YRS EXPER \_\_\_\_\_ YRS IN BUSINESS \_\_\_\_\_

PRIOR CARRIER \_\_\_\_\_ DOES AGENT KNOW PERSONALLY? \_\_\_\_\_

CURRENT RATE & DEDUCTIBLE \_\_\_\_\_ WC exp mod \_\_\_\_\_

WHAT OTHER COVERAGES DO YOU WRITE? \_\_\_\_\_

PRIOR LOSSES (LAST 5 YEARS) PROVIDE DETAILS \_\_\_\_\_

\_\_\_\_\_ Logging Risks- Contracted with \_\_\_\_\_

MAINTENANCE PROGRAM IN PLACE? \_\_\_\_\_ PROVIDE DETAILS \_\_\_\_\_

OVERALL FINANCIAL CONDITION/NET WORTH \_\_\_\_\_

AGENT'S RECOMMENDATION:

UNIT #    YEAR    MAKE & MODEL    SERIAL NUMBER

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

UNIT #    LIMIT OF INSURANCE    DEDUCTIBLE    RATE    PREMIUM

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

UNIT #    LOSS PAYEE INFO

\_\_\_\_\_

WEBSITE: [www.daigleins.com](http://www.daigleins.com)    FAX 1-601-924-4659    NATIONAL WATTS 1-800-647-7660    LOCAL 1-601-924-4522

**(Quotes are good for 60 days - resubmit if change in schedule or loss experience)**