



3300 W 84th Street Bay #1 Hialeah, FL 33018
Ph: 305-883-4604 Fax: 305-883-1171

MOTORCYCLE INSURANCE QUOTE

First and last name _____
Address _____
City, State & Zip _____
Phone: _____ Fax _____
Email address _____

Current Insurance Information

Insurance Co. Name _____
Policy Exp. Date _____ Premium amount: _____
Term _____ How Long with current? _____

Motorcycle Information

Year : _____ Model: _____
Manufacturer: _____
CC's: _____
VIN # _____

Approximate annual motorcycle mileage: _____

Is this Motorcycle a Trike? Yes No _____

Homemade Kit: Yes No _____ Non-Factory Built Yes No _____

Rebuilt Salvaged Yes No _____ Original Frame Replaced Yes No _____

State assigned VIN Retitled Yes No _____

Comprehensive Deductible: _____

Collision Deductible: _____

Safety Features _____

Anti-Lock Brakes Yes No _____ Passive Alarm Yes No _____

Add any additional information that may assist us in your watercraft quote including coverages and/or coverage for yachts, personal watercraft or jet skis: