

# Motorcycle and Off-Road Vehicle Insurance Quote Request

## CUSTOMER INFORMATION

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Sex:  M  F

Date of Birth: / / Social Security Number: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Home Address: \_\_\_\_\_ Marital Status:  Married  Single  Other: \_\_\_\_\_

**Driving Record** (prior 35 months)

Number of/Nature of Tickets (all vehicles): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Primary Residence:  Own Home/Condo \_\_\_\_\_

Own Mobile Home: 10 years old or newer \_\_\_\_\_

Rent \_\_\_\_\_

Live with Parents \_\_\_\_\_

Other \_\_\_\_\_ Automobile Driver License Status: \_\_\_\_\_

Number of/Nature of AF/NAF Auto/Motorcycle Accidents: \_\_\_\_\_

## MOTORCYCLE/OFF-ROAD INFORMATION

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ CC Size: \_\_\_\_\_

Is the Motorcycle a Trike?  Yes  No VIN: \_\_\_\_\_

Special Hazard (Turbo or nitrous oxide kit, modified frame)?  Yes  No

### Special Construction Determination:

Does the vehicle fall into one of the following categories? (If so, physical damage coverage not available.)

Homemade or Composite  Kit  State-Assigned VIN  Non-factory built MC/Trike

Not listed in both Kelley Blue Book or N.A.D.A. Appraisal Guide  Original frame has been replaced

## UNDERWRITING INFORMATION

Garaging ZIP Code: \_\_\_\_\_ Passed Safety Course:  Yes  No

Vehicle Use (i.e., pleasure, business, etc.):  Pleasure  Business  Off-Road

(Anyone with regular access to insured vehicle more than 12 times a year)  
Names of Regular Operators: \_\_\_\_\_

Names of Household Resident Operators: \_\_\_\_\_

## COVERAGE INFORMATION

### Accessory Coverage

Liability/Guest Passenger Limits: \_\_\_\_\_ Paint: \$ \_\_\_\_\_

UM/UIM: \_\_\_\_\_ Chrome: \$ \_\_\_\_\_

UMPD: \_\_\_\_\_ Wheels: \$ \_\_\_\_\_

Med Pay: \_\_\_\_\_ Trike Kit: \$ \_\_\_\_\_

Comp/Coll Deductibles: \_\_\_\_\_ Saddlebags/Windshield: \$ \_\_\_\_\_

Roadside Assistance: \_\_\_\_\_ Pull Behind Trailer: \$ \_\_\_\_\_

Transport Trailer: \_\_\_\_\_ Other: \$ \_\_\_\_\_

**Total:** \$ \_\_\_\_\_

**Note To Customer** (in credit states only): To provide an accurate quote, we have asked you numerous questions about yourself and your motorcycle. As part of the quoting process, we will also be utilizing various consumer reports which may include reports regarding your credit history. All information we acquire may be provided to our insurance carriers. Please initial here if we have your permission to gather and share information as described herein: \_\_\_\_\_

Please complete and fax back to 732 828 1980, or email to [steve@barrood.com](mailto:steve@barrood.com)