Personal Insurance Quote Questionnaire — ATV / UTV / Golf Cart

Fill in what you know — leave blanks for anything you're unsure of. An agent will gladly help with the rest.

Your Contact Info

Coverages you want quoted

☐ Auto ☐ Homeowners ☐ Renters ☐ Condo / Townhome (HO-6) ☐ Landlord / Rental Dwelling ☐ Mobile / Manufactured Home
☐ Personal Umbrella ☐ Motorcycle ☐ Boat & Watercraft ☐ RV / Motorhome / Travel Trailer ☑ ATV / UTV / Golf Cart
☐ Collector / Classic Car ☐ Jewelry & Valuables ☐ Life Insurance ☐ Probate Bond

Full Name

Date of Birth

Preferred Office

Email

Phone

Best Time to Reach You

Options: Morning · Midday · Afternoon · Evening · Any time

Marital Status

Options: Single · Married · Domestic partner · Widowed · Divorced · Separated

Occupation / Employer

Spouse / Co-Applicant Name (if any)

Spouse / Co-Applicant Date of Birth

Spouse / Co-Applicant Phone

Your Address

Home Street Address

City

State

ZIP

County

Do You Own or Rent Your Home?

Options: Own · Rent · Live with family · Other

Mailing Address (if different)

Years at This Address

Current Insurance

Bundling often saves money. Tell us who insures your auto and home today, even if you only want one of the coverages below quoted.

Current Auto Insurance Company

Current Home / Renters Insurance Company

Date You Want Coverage to Start

Current Policy Expiration (if any)

Has any insurance company cancelled, refused or non-renewed a policy for anyone in your household in the past 5 years? ☐ **Yes** ☐ **No**

If yes, please explain

Claims (past 5 years)

Any insurance claims or losses in the past 5 years for anyone in your household? ☐ **Yes** ☐ **No**

#	Date	Type of Claim	What Happened	Amount Paid
1				
2				
3				

Type of Claim: Home / Property / Auto / Water damage / Theft / Liability / Weather / Hail / Wind / Flood / Other

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Fill in what you know — leave blanks for anything you're unsure of. An agent will gladly help with the rest.

Riders, Drivers & Operators

List everyone who will ride, drive or operate the vehicles or watercraft below. You only need to list each person once.

#	Name	Date of Birth	Driver's License # (optional)	State	Years Experience	Tickets / Accidents (5 yrs)
1						
2						
3						
4						

State: NC / SC / GA / TN / WV / Other

Has anyone completed a motorcycle or boating safety course? ☐ Yes ☐ No — If yes, please explain: _____

ATVs, UTVs, Golf Carts & Other Off-Road

#	Year	Make / Model	Type	VIN / Serial (optional)	Value
1					
2					
3					

Type: ATV / four-wheeler / UTV / side-by-side / Golf cart / Street-legal golf cart / LSV / Dirt bike / Snowmobile / Other

Where Is It Ridden?

Options: Only on my own property · Trails / parks · Neighborhood streets (golf cart) · Mix of these

Coverage

Options: Full coverage (theft & damage) · Liability only · Not sure

Will anyone under 16 operate it? ☐ Yes ☐ No — If yes, please explain: _____

Notes & Authorization

Additional Notes or Questions for Your Agent

Helpful to include: current declarations pages, appraisals for valuables, and (for probate bonds) the court order showing the bond amount. Please do NOT write bank account or payment card numbers on this form. Social Security numbers belong only in the Probate Bond boxes.

DISCLAIMER: This worksheet is for quotation purposes only and does not bind coverage. By signing, you authorize Maxwell B. Hamrick Insurance Agency, Inc. and the insurance companies and surety companies it represents to obtain claims history, motor vehicle reports, insurance scores and (for bonds) credit information as needed to prepare accurate quotes.

Signature (type full name) _____ **Date** _____

Return completed form to state@mbhamrickins.com — or bring to Boiling Springs or Shelby — Questions? 1-800-993-3800