



PHONE: (925)493-7525

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QUICK QUOTE SHEET

EMAIL FMagallon@GCIB.net

TODAY'S DATE 07/26/2017 TIME _____ COVERAGE DATE _____
CONTACT NAME LOUIS PERREIRA AGENCY JLP INSURANCE CAB _____
TELE # 281 - 599 - 3741 FAX 281 - 599 - 3840 EMAIL LP@JLPINSURANCELLC.COM
INSURED ISABEL DEULOFEU TENA DBA _____
GARAGING CITY 18623 WILLOW MOSS KATY ST TEXAS ZIP 77449
NATURE OF BUSINESS HIRED FOR TRUCK
COMMODITIES HAULED STEEL PIPES AND BUILDING MATERIALS
YRS IN BUSINESS NEW VENTURE LOSSES 3 YRS LIA \$ 1,000,000.00 PD \$ _____ CG \$ _____
Attach Loss Report(s) for all Accident(s)

RADIUS OF OPERATION 500 TRAILERS:

VEHICLE YEAR	MAKE MODEL	GVW	VALUE	DED
1. <u>2006/FRHT</u>	<u>VIN:1FUJA6CK66LV44391</u>	_____	\$ _____	\$ _____
2. _____	_____	_____	\$ _____	\$ _____
3. _____	_____	_____	\$ _____	\$ _____
4. _____	_____	_____	\$ _____	\$ _____

TRAILER YEAR	MAKE MODEL	GVW	VALUE	DED
1. _____	_____	_____	\$ _____	\$ _____
2. _____	_____	_____	\$ _____	\$ _____
3. _____	_____	_____	\$ _____	\$ _____
4. _____	_____	_____	\$ _____	\$ _____

OWNER DRIVEN: Attach MVR's for all driver(s) and owner(s) no more than 30 days old.

NAME OF DRIVERS

1. ISABEL DEULOFEU TENA CDL:39616722 2. DOB:10/01/1986
3. _____ 4. _____

FILING: YES TYPE USDOT:30301438 # _____
Provide all filing number(s)

LIABILITY \$ 1,000,000.00

CARGO \$ 100,000 DED \$ 1000

UM

PIP

PIP only available where mandatory

REEFER BREAKDOWN:

DED: \$

COMMENTS

Send the completed app. with required documents, indication quote will be provided within two hours. If you did not receive please contact your underwriter or marketing rep, or call Kelly @ (925)493-7525 ext. 115 or Charan @ (925)493-7525 ext. 162.
Lic #0E52042