



PHONE: (925)493-7525

FAX: (925)493-7526

QUICK QUOTE SHEET

EMAIL FMagallon@GCIB.net

TODAY'S DATE 8/21/2017 TIME _____ COVERAGE DATE _____
CONTACT NAME LOUIS PERREIRA AGENCY JLP INSURANCE CAB _____
TELE # 281 - 599 - 3741 FAX 281 - 599 - 3840 EMAIL LP@JLPINSURANCELLC.COM
INSURED STRONG TRUCK LLC DBA _____
GARAGING CITY 301 W LITTLE YORK RD #1131 HOUSTON ST TX ZIP 77076
NATURE OF BUSINESS FOR HIRE TRUCKING
COMMODITIES HAULED STEEL PIPE AND BUILDING MATERIALS
YRS IN BUSINESS NEW VENTURE LOSSES 3 YRS LIA \$ 1,000,000 PD \$ _____ CG \$ _____
Attach Loss Report(s) for all Accident(s)

RADIUS OF OPERATION 1500 TRAILERS:

VEHICLE YEAR	MAKE MODEL	GVW	VALUE	DED
1. <u>2010 FRHT</u>	<u>VIN 1FUJGLDR9ALAF0686</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. JORGE FERNANDEZ DOB 09/29/1956 TX 03534783 2. _____
3. _____ 4. _____

FILING: YES TYPE USDOT # 3040337

Provide all filing number(s)

LIABILITY \$ 1,000,000

UM

PIP

PIP only available where mandatory

CARGO \$ 100,000 DED \$ _____

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