

Transportation Quick Quote Form

Date 11/22/2017
 Named Insured RAFAELA DEL CARMEN QUESADA US DOT 3027454 ICC# _____
 DBA R & RD TRUCKING CORPORATION FEIN / SSN _____ TXDOT# _____
 GARAGE ADD 7862 KELLWOOD DR CITY HOUSTON STATE TX ZIP 77040 CO _____
 MAIL ADD _____ CITY _____ STATE _____ ZIP _____ CO _____
 BUS. TEL _____
 # _____ COMMODITIES DRY VAN, DRY RETAIL MERCHANDISE

AREA OF OPERATION / STATES TRAVELLED 48 STATES RADIUS 1500
 EFFECTIVE DATE _____ #YRS W/OWN AUTH _____ ANN. MILEAGE/PWR UNT _____
 PRIMARY LIABILITY 1,000,000 UM/UIM _____ PIP _____ H/NOA _____
 NON-TRUCKING LIA _____ UM/UIM _____ PIP _____ H/NOA _____
 PHYSICAL DAMAGE _____ TIV _____ PHYS.DED. _____
 CARGO LIMIT 100,000 CARGO DED. 1,000 TRL INT _____ TRL INT LIMIT _____

EQUIPMENT LIST:

YEAR	MAKE	TYPE	GVW	VALUE	VIN
1 YEAR <u>2013</u>	<u>FRHT</u>	<u>TT</u>	<u>80K</u>	<u>VALUE</u>	<u>VIN 1FVACWDT9DDFD9799</u>
2 YEAR _____	<u>MAKE</u>	<u>TYPE</u>	<u>GVW</u>	<u>VALUE</u>	<u>VIN</u>
3 YEAR _____	<u>MAKE</u>	<u>TYPE</u>	<u>GVW</u>	<u>VALUE</u>	<u>VIN</u>
4 YEAR _____	<u>MAKE</u>	<u>TYPE</u>	<u>GVW</u>	<u>VALUE</u>	<u>VIN</u>
5 YEAR _____	<u>MAKE</u>	<u>TYPE</u>	<u>GVW</u>	<u>VALUE</u>	<u>VIN</u>

DRIVER LIST: DOB EXP DOH DL# STATE 3 YR MVR VIOLATIONS
 1 JORGE TAMAYO 10/22/1978 _____ 40723895 TX _____

2 _____
 3 _____
 4 _____
 5 _____

PRIOR CARRIERS/LOSSES

CURRENT YR	POL#	#LOSSES	\$INCURRED
1 ST PRIOR _____	<u>POL#</u>	<u>#LOSSES</u>	<u>\$INCURRED</u>
2 ND PRIOR _____	<u>POL#</u>	<u>#LOSSES</u>	<u>\$INCURRED</u>

HAS POLICY CANCELLED OR BEEN NON-RENEWED IN LAST 3 YEARS? _____ IF YES, WHY? _____

REMARKS

EXPIRING PREMIUM _____ AGENCY RENEWAL _____
 PRODUCER _____
 EMAIL _____
 PHO# _____ FAX# _____

