



## COMMERCIAL AUTO QUICK QUOTE SHEET

TODAY'S DATE 09/12/2017 TIME \_\_\_\_\_ COVERAGE DATE \_\_\_\_\_

CONTACT NAME LOUIS PERREIRA AGENCY JLP INSURANCE CAB \_\_\_\_\_

TELE # 281 - 599 - 3741 FAX \_\_\_\_\_ - \_\_\_\_\_ EMAIL LP@JLPINSURANCELLC.COM

INSURED L&H TRANSPORT LLC DBA \_\_\_\_\_

GARAGING CITY 11346 PARAMOUNT LN HOUSTON ST TX ZIP 77067

NATURE OF BUSINESS TRUCKING FOR HIRE

COMMODITIES HAULED VEHICLE

YRS IN BUSINESS \_\_\_\_\_ RENEW \_\_\_\_\_ LOSSES 3 YRS \_\_\_\_\_ LIA \$ \_\_\_\_\_ PD \$ 47K CG \$ \_\_\_\_\_

Attach Loss Report(s) for all Accident(s)

RADIUS OF OPERATION 1500 TRAILERS:

VEHICLE YEAR	MAKE MODEL	GVW 9000 LBS	VALUE	DED
1. <u>2016</u>	<u>RAM RAM 3500</u>	_____	<u>\$ 40K</u>	<u>\$ 1000</u>
2. _____	<u>VIN:3C63RRHL9GG318878</u>	_____	<u>\$</u>	<u>\$</u>
3. _____	_____	_____	<u>\$</u>	<u>\$</u>
4. _____	_____	_____	<u>\$</u>	<u>\$</u>

TRAILER YEAR	MAKE MODEL	GVW	VALUE	DED
1. <u>2016</u>	<u>LONE STAR TRAILER</u>	_____	<u>\$ 7K</u>	<u>\$ 1000</u>
2. _____	<u>VIN:5VYGL3620HH007962</u>	_____	<u>\$</u>	<u>\$</u>
3. _____	_____	_____	<u>\$</u>	<u>\$</u>
4. _____	_____	_____	<u>\$</u>	<u>\$</u>

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

### NAME OF DRIVERS

1. DARRYL EUGENE JOHNSON 12/10/1960 2. 07050128 TX  
 2. \_\_\_\_\_ 4. \_\_\_\_\_

FILING: TYPE \_\_\_\_\_ # \_\_\_\_\_

Provide all filing number(s)

LIABILITY \$ \_\_\_\_\_ UM PIP  
 CARGO \$ \_\_\_\_\_ DED \$ \_\_\_\_\_ PIP only available where mandatory  
 REEFER BREAKDOWN: DED: \$ \_\_\_\_\_

### COMMENTS

PHYSICAL DAMAGE ONLY

Send the completed app. with required documents via email to [mgains@paramounttx.com](mailto:mgains@paramounttx.com), Attn: Salena  
or fax to 866-514-2300