

# Transportation Quick Quote Form

Named Insured DEEP HOPE TRANSPORTATION LLC US DOT 2891853 Date 5/17/2017  
 DBA \_\_\_\_\_ FEIN / SSN \_\_\_\_\_ TXDOT# \_\_\_\_\_  
 GARAGE ADD 7534 OAKWOOD CANYON DR CITY CYPRESS STATE TX ZIP 77433 CO \_\_\_\_\_  
 MAIL ADD \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ CO \_\_\_\_\_  
 BUS. TEL \_\_\_\_\_  
 # \_\_\_\_\_ COMMODITIES STEEL PIPE BUILDING MATERIALS

AREA OF OPERATION / STATES TRAVELLED \_\_\_\_\_ 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	FRTH	TYPE	GVW	VALUE	VIN
1 YEAR <u>2002</u>	<u>MAKE</u>	<u>FRTH</u>	<u>TT</u>	<u>80K</u>	<u>VALUE</u>	<u>1FUJBBDX2LJ06797</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 <u>JOSE C GONZALEZ</u>	<u>04/27/1982</u>	_____	_____	<u>36633658</u>	<u>TX</u>	_____
2 _____	_____	_____	_____	_____	_____	_____
3 _____	_____	_____	_____	_____	_____	_____
4 _____	_____	_____	_____	_____	_____	_____
5 _____	_____	_____	_____	_____	_____	_____

## PRIOR CARRIERS/LOSSES

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

