

Quote Information Application

Insurance for Filta Environmental Kitchen Solutions Franchisees



General Information

BUSINESS NAME		CONTACT NAME	
BUSINESS TYPE			
<input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> LIMITED LIABILITY COMPANY			
ADDRESS			
CITY		STATE	ZIP
EMAIL ADDRESS		PHONE	FAX

Liability & Workers Compensation Coverage

NUMBER OF EMPLOYEES	ESTIMATED ANNUAL PAYROLL
ANNUAL SALES	FEDERAL EMPLOYER ID NUMBER

Automobile Coverage

ARE ANY VEHICLES OWNED LEASED THROUGH SUTTON LEASING? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, COMPLETE LIABILITY AND PHYSICAL DAMAGE BELOW	ARE ANY VEHICLES OWNED BY AN INDIVIDUAL? <input type="checkbox"/> YES <input type="checkbox"/> NO
LIABILITY LIMITS REQUESTED	PHYSICAL DAMAGE DEDUCTIBLES REQUESTED

Vehicle List

VEHICLE 1	YEAR	MAKE	MODEL	VIN
VEHICLE 2	YEAR	MAKE	MODEL	VIN
VEHICLE 3	YEAR	MAKE	MODEL	VIN

Driver List

DRIVER 1	NAME	DATE OF BIRTH	STATE LICENSED	LICENSE NUMBER
DRIVER 2	NAME	DATE OF BIRTH	STATE LICENSED	LICENSE NUMBER
DRIVER 3	NAME	DATE OF BIRTH	STATE LICENSED	LICENSE NUMBER

Equipment Coverage

NUMBER OF MFU'S	LIST SERIAL NUMBERS FOR EACH UNIT
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