VACANT EXPRESS QUICK QUOTE



*REQUIRED INFORMATION

*AGENCY NAME:	
YOUR NAME:	
PHONE #:	FAX #:
FMAII:	

*POLICY TYPE (CIRCLE):

VACANT DWELLING/MOBILE HOME VACANT COMMERCIAL BUILDING

VACANT CONDO/TOWNHOUSE

NEW CONSTRUCTION

RENOVATIONS LANDLORD

*NAME:	DATE OF BIRTH:	
*RISK INFO:		
LOCATION ADDRESS:	CITY: STATE:	
ZIP CODE: P.C YEAR BUIL	T: SQUARE FOOTAGE:	
COVERAGE TYPE	LIMIT OF COVERAGE	
DWELLING (ACV) (PLEASE ADVISE IF SCHEDULED DWELLINGS)	\$	
RENOVATIONS (ACV) *PLEASE ADVISE IF APPLICANT OR CONTRACTOR DOING THE WORK:		
PERSONAL PROPERTY (ACV)	\$	
ADJACENT STRUCTURE DESCRIPTION:	\$ \$	
DESCRIPTION:	\$	
DESCRIPTION:		
COMMERCIAL GENERAL LIABILITY LIMITS (\$100K / \$300K /	\$500K / \$1 MILLION)	
VANDALISM & MALICIOUS MISCHIEF	INCLUDED	
TERRORISM (YES / NO)		
DEDUCTIBLE (\$500 / \$1,000 / \$2,500 / \$5,000)		
POLICY TERM (3 MONTH / 6 MONTH / 12 MONTH)		
A three month policy is subject to a Minimum Retained Premium of \$100 or 100% of premium, whichever is greater.		

A six month policy is subject to a Minimum Retained Premium of \$100 or 50% of premium, whichever is greater.

A twelve month policy is subject to a Minimum Retained Premium of \$100 or 25% of premium, whichever is greater.

This is a quote and is for informational purposes only. This is NOT a guarantee of coverage. All underwriting questions, company rules and binding are subject to review.

Down payment due at time of application, unless bill to lienholder.

andy@thecentralagency.com

Jennifer@thecentralagency.com

Jim@thecentralagency.com

PO BOX 2627 WENATCHEE, WA 98807 * 800/678-1642 * **FAX 509/663-0092**

www.thecentralagency.com