

Snyder Insurance Services
 8801 Renner Avenue – Ste 410, Lenexa, KS 66219
Toll Free-800-874-6704 Fax-913-498-0212

Personal Auto Quote Request Form

Name:	Best # to Call:
Address:	Email:
City/State/Zip:	Fax #:

List all licensed drivers who live in the household:

Name	Date of Birth	Drivers License #	State Licensed	Social Security #

The below drivers qualify for a Good Student Discount (3.0 or better) or Defensive Driver Discount:

Name	Type of Discount	GPA or Date Defensive Driver Certificate Issued

List all vehicles including year/make/model:

#	Year	Make	Model	# of doors	Vehicle ID number (if available)	Use (pleasure / work)
1						
2						
3						
4						
5						

If you don't know your current coverage amounts, just leave blank

Bodily Injury Liability: 25/50 50/100 100/300 250/500 50 100 300 500
Collision Deductible: No Coverage 250 500 1,000 Other _____
Comprehensive Deductible: No Coverage 250 500 1,000 Other _____
Medical Payments: No Coverage 500 1,000 5,000 10,000 Other _____
Uninsured/ Underinsured Motorist: None Same as Liability
Rental car: None 25/Day 30/Day 50/Day **Towing:** None 50 100 Other _____
Any other optional coverages? Please list: _____

I would like Liability coverage only on vehicle #1 #2 #3 #4

Current Company:	
Policy#:	Expiration Date:

Prior Claim and violation history within last 5 years

Drivers Name	Approximate Date	Violation or Claim Description (include towing & glass)

Please fax back to 913-498-0212 or email to nancycaruso@insurasset.com