

MCNABB INSURANCE SERVICES  
818 567-0075 Fax

Underwritten by:  
*Topa Insurance Company*

Date Submitted: \_\_\_\_\_

**COMMERCIAL AUTO/TRUCK PROGRAM**  
**Quick Quote Fax Sheet**

Producer: \_\_\_\_\_ Producer Code \_\_\_\_\_ Phone # \_\_\_\_\_

Producer Contact Name: \_\_\_\_\_ Fax# \_\_\_\_\_

Insured Name/DBA \_\_\_\_\_

Mailing Address \_\_\_\_\_ Mailing Zip Code \_\_\_\_\_ Garaging Zip Code \_\_\_\_\_

Years in Business \_\_\_\_\_ Years Prior Ins. \_\_\_\_\_ Prior Carrier \_\_\_\_\_

Target Rate \_\_\_\_\_ Maximum Radius \_\_\_\_\_ miles Filing: ICC / DMV / PUC  
Number: \_\_\_\_\_

**VEHICLE LIST:**

*Vehicles:* \_\_\_\_\_ *Total #* \_\_\_\_\_  
Year Make Model Axles VIN# Value GVW

**DRIVER LIST:**

*Total # Drivers:* \_\_\_\_\_  
Name DOB Total Yrs. Driving Exp. Yrs Comm'l Lic Exp & Class Acc/Violations

Describe type of Business: \_\_\_\_\_

Describe and show percent of All Types of Cargo Hauled:

Claims Reported - Last 3 Years: \_\_\_\_\_ *Total #of Claims* \_\_\_\_\_  
Year Carrier Type Of Loss Amt Pd./Reserved Status Open/Closed

**COVERAGE REQUESTED**

Auto Liability Limit \$ \_\_\_\_\_ On-Hook Limit \$ \_\_\_\_\_ On-Hook Deductible: \$500 or \$1,000

UM/UMBI Limit \$ \_\_\_\_\_ UMPD Limit \$3,500: Yes or No Medical Limit \$ \_\_\_\_\_

Physical Damage per Vehicle List, including current values: Deductible \$ \_\_\_\_\_ Combined Single Deductible \$ \_\_\_\_\_

Liability BI/PD Deductible requested: Bodily Injury Deductible \$ \_\_\_\_\_ Property Damage Deductible \$ \_\_\_\_\_

For a Trucker General Liability quote please contact Louise Tebelekian at extension 325