



E-RATE

P.O. Box 36385 • Cincinnati, OH 45236 • www.sugroup.net
 Toll Free (800) 844-1815 • Toll Free FAX (800) 258-1058

Email the completed form to quotes@sugroup.net or fax it to (800) 258-1058.
 OUR GOAL IS TO RETURN **COMPLETED** QUOTE SHEETS WITHIN 1 HOUR; OR WE'LL PAY YOU \$5

Vehicle Type (Check One)

Race Car Specialty Kit Car Auto/Truck

General Information

Applicant Information

Name: _____
 Phone Number: _____
 Email: _____
 Residence Address: _____ State: _____
 City: _____ Zip: _____
 Own Home Own Manufactured Home Own Condo Rent

Driving History (last 36 months)

Accidents: _____ At Fault _____ Not at Fault _____
 Violations: _____ Major _____ Minor _____

Please Note Not Eligible- If driver has any of the following

Driver Convicted of Felony
 Require SR-22 filing: License
 Suspend/Canceled/Revoked

Marital Status: Single Married
 Operator's Age: _____ Youngest Operator's Age: _____
 Applicant's DOB: _____

Storage Type

Locked Garage/Building Carport
 Rental Unit Driveway/ Off Street Parking

Vehicle Information

Vehicle Description

Make: _____ Model: _____
 Year: _____ Odometer: _____
 VIN: _____

Limits Requested

ACV Value: \$ _____
 Liability Limits: \$ _____
UM/UIM BI Limit: \$ _____
UM/UIM PD \$ _____
Limit: Med Pay \$ _____
 Limit: \$ _____
 PD Deductible: \$ _____
 Coverage Option: \$ _____
 Comprehensive Collision
 Liability Only

Vehicle Information

Value: _____ Purchase Date: _____
 Usage: Pleasure Work Other
 Condition: Pristine Excellent Good
 Fair Being Restored
 Miles Driven Per Year: _____ Currently For Sale: _____
 Modifications: _____

ADDITIONAL COMMENTS:

List additional vehicles/operators

1. _____
2. _____
3. _____
4. _____

Agency Information

Agency: _____ Contact: _____
 Phone: _____ Fax: _____ Email: _____