WEATHER BEE'S INSURANCE

Insurance Quote Sheet

HIGHWAY CERTIFIED INSURANCE AGENCY

QUOTE DETAILS & BUSINESS PROFILE

Complete all 5 pages and return to your agent.

1. Quote Details

Current Rate

Target Rate

Renewal Date

New Venture? ◯ Yes ◯ No **Mid-term Move?** ◯ Yes ◯ No

2. Business Information

Name of Corporation

DBA (if any)

Year Business Started

MC #

DOT #

State of Authority

Mailing Address

Garaging Address ☐ Same as mailing

Phone Number

Email

Tax ID (FEIN)

3. Operations

Commodities Hauled List 3–5 specific commodities

Radius Traveled
% of operations

0–50 miles ____ % 51–200 miles ____ % 201–500 miles ____ % Over 500 miles ____ %

4. Owner Information

Owner's Name

Driver's License #

DL State

Date of Birth

Years of CDL Experience

Is Owner a Driver? ◯ Yes ◯ No

If yes, the owner is Driver 01 on page 3 — no need to re-enter these details.

UNIT SCHEDULE

☐ See unit list attached

One row per power unit or trailer

List each unit and choose its type. Enter the physical damage value you want covered, or leave it blank.

Unit	Year	Make	Model	VIN # (17 characters)	Physical Damage	Power Unit / Truck	Trailer
01						○	○
02						○	○
03						○	○
04						○	○
05						○	○
06						○	○
07						○	○
08						○	○
09						○	○
10						○	○
				Total Physical Damage (TIV)			

More than 10 units? Attach a list with the same columns.

DRIVER SCHEDULE

☐ See drivers list attached

Drivers 01–05 · one block per driver

DRIVER 01

Full Name	Date of Birth	DL #	DL State	Yrs CDL Exp.	Date of Hire

Driver Type ◯ Owner Operator ◯ Employee Driver **Violations?** ◯ Yes ◯ No

Notes

DRIVER 02

Full Name	Date of Birth	DL #	DL State	Yrs CDL Exp.	Date of Hire

Driver Type ◯ Owner Operator ◯ Employee Driver **Violations?** ◯ Yes ◯ No

Notes

DRIVER 03

Full Name	Date of Birth	DL #	DL State	Yrs CDL Exp.	Date of Hire

Driver Type ◯ Owner Operator ◯ Employee Driver **Violations?** ◯ Yes ◯ No

Notes

DRIVER 04

Full Name	Date of Birth	DL #	DL State	Yrs CDL Exp.	Date of Hire

Driver Type ◯ Owner Operator ◯ Employee Driver **Violations?** ◯ Yes ◯ No

Notes

DRIVER 05

Full Name	Date of Birth	DL #	DL State	Yrs CDL Exp.	Date of Hire

Driver Type ◯ Owner Operator ◯ Employee Driver **Violations?** ◯ Yes ◯ No

Notes

DRIVER SCHEDULE

Drivers 06–10 · one block per driver

DRIVER 06

Full Name	Date of Birth	DL #	DL State	Yrs CDL Exp.	Date of Hire

Driver Type ◯ Owner Operator ◯ Employee Driver **Violations?** ◯ Yes ◯ No

Notes

DRIVER 07

Full Name	Date of Birth	DL #	DL State	Yrs CDL Exp.	Date of Hire

Driver Type ◯ Owner Operator ◯ Employee Driver **Violations?** ◯ Yes ◯ No

Notes

DRIVER 08

Full Name	Date of Birth	DL #	DL State	Yrs CDL Exp.	Date of Hire

Driver Type ◯ Owner Operator ◯ Employee Driver **Violations?** ◯ Yes ◯ No

Notes

DRIVER 09

Full Name	Date of Birth	DL #	DL State	Yrs CDL Exp.	Date of Hire

Driver Type ◯ Owner Operator ◯ Employee Driver **Violations?** ◯ Yes ◯ No

Notes

DRIVER 10

Full Name	Date of Birth	DL #	DL State	Yrs CDL Exp.	Date of Hire

Driver Type ◯ Owner Operator ◯ Employee Driver **Violations?** ◯ Yes ◯ No

Notes

More than 10 drivers? Attach a list with the same details.

INSURANCE HISTORY & COVERAGE

Include available policy and loss information

Current & Prior Insurance

Term	Insurance Carrier	Policy Number	Effective From	Effective To	Losses (describe, or enter "None")
Current					
Prior Term 1					
Prior Term 2					

A. Liability, Cargo & General Liability

Auto Liability Limit ◯ $1,000,000 CSL ◯ $750,000 CSL

Auto Add-ons (any) ☐ Hired Auto ☐ Non-Owned Auto

Cargo Coverage ◯ $100,000 ◯ $250,000 ◯ $500,000 ◯ $1,000,000

General Liability ◯ $1M per occurrence / $2M aggregate ◯ $2M per occurrence / $2M aggregate

B. Physical Damage & Trailer

Reefer Breakdown Needed? ◯ Yes ◯ No **Trailer Interchange by Contract?** ◯ Yes ◯ No

Non-Trailer Limit

Physical Damage TIV (page 2 total)

Deductible ◯ $1,000 ◯ $2,500

C. Other Requested Coverages

Umbrella? ◯ Yes ◯ No **Workers Comp?** ◯ Yes ◯ No **UIIA?** ◯ Yes ◯ No

D. Safety Technology

Cameras? ◯ Yes ◯ No Provider

ELD? ◯ Yes ◯ No Provider

GPS? ◯ Yes ◯ No Provider