

COMMERCIAL QUOTE

Name of Business: _____

Is the Business a Corporation? _____ LLC? _____ Individual? _____

Address of the Business: _____

How long has the Business been in Existence: _____

Phone Number: _____ Email: _____

Contact person for additional information: _____

Type of Business Insurance you are seeking? _____

Workers Compensation _____; General Liability _____; Commercial Auto _____; Directors & Officers Coverage _____; Property Coverage _____; Business-owners _____

Is the Business Currently Insured? _____

If So, By what company: _____

Any claims/losses in the last 5 years: _____

Explain the business and what you do? _____

How many employees are in the business? _____

What are your gross receipts for the year? (estimated) _____

What is your gross payroll? (estimated) _____