



A. GENERAL INFORMATION

1. Applicant Name: _____
 DBA (if any): _____
 Mailing Address: _____
 City, State and Zip: _____
 Telephone: _____ Fax: _____
 Contact Name: _____ E-mail address: _____

2. Premises Location if Different: _____
 (include Zip Codes) _____

B. RV COVERAGES INFORMATION

Liability: \$100,000 \$300,000 \$500,000 \$1,000,000 Other: \$ _____

Physical Damage: Yes No

Comprehensive Deductible : \$ _____ Collision Deductible: \$ _____

of Units : _____ How many avg. months are your rentals active ?: _____

Rental Vehicle Type

<i># units</i>	<i>Type of vehicle</i>	<i># units</i>	<i>Type of vehicle</i>
_____	Motorhomes / RV's - Class A	_____	Folding Camping Trailers
_____	Conversion Vans – Class B	_____	Truck Campers
_____	Mini Motorhomes – Class C	_____	Travel Trailers
_____	5th Wheel Trailers	_____	Tow Vehicles

Description of Business/Business Practices :

1. How long has this business been in existence? _____ yrs
2. Is this a Start Up or New Business venture? Yes No
3. Who is your current insurance carrier? _____
4. What is your current premium? \$ _____
5. Have you ever been cancelled or denied insurance because of losses? Yes No
6. What value range are your units ? \$ _____ to \$ _____
7. Do you rent other people's RV units ? 0 Yes 0 No
8. Do you rent tow vehicles also ? 0 Yes 0 No