

**Ramey Insurance Agency, Inc**  
**Auto Insurance Quote**

First Name \_\_\_\_\_ M \_\_\_\_\_ Last \_\_\_\_\_  
Address \_\_\_\_\_

Lived here for 3 years? \_\_\_\_\_ Prior Address \_\_\_\_\_

Main Phone Number: \_\_\_\_\_ Alt # \_\_\_\_\_

**Married**  **Single**  **Divorced**  **Widowed**

Current Insurer: \_\_\_\_\_ Expires/Renews: \_\_\_\_\_

Premium: \_\_\_\_\_ Current Monthly Rate: \_\_\_\_\_

---

Driver #1 Name: \_\_\_\_\_

DOB: \_\_\_\_\_ DL# \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_ Education Level: \_\_\_\_\_

Tickets/Accidents/Claims? \_\_\_\_\_

Driver #2 Name: \_\_\_\_\_

DOB: \_\_\_\_\_ DL# \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_ Education Level: \_\_\_\_\_

Tickets/Accidents/Claims? \_\_\_\_\_

Driver #3 Name: \_\_\_\_\_

DOB: \_\_\_\_\_ DL# \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_ Education Level: \_\_\_\_\_

Tickets/Accidents/Claims? \_\_\_\_\_

Driver #4 Name: \_\_\_\_\_

DOB: \_\_\_\_\_ DL# \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_ Education Level: \_\_\_\_\_

Tickets/Accidents/Claims? \_\_\_\_\_

**Current Bodily Injury Liability Limits (If Applicable):**

**25/50**  **50/100**  **100/300**  **250/500**  **300 CSL**  **500 CSL**  **1 Million CSL**

**Property Damage Limit:**

**\$20k**  **\$25k**  **\$50k**  **\$100k**  **\$250k**  **\$300k CSL**  **\$500k CSL**  **\$1M CSL**

**Medical Payment Limits (Per Person):**

**\$1k**  **\$2k**  **\$5k**  **\$10k**  **\$25k**  **\$50k**  **\$100k**

**Vehicle #1** Primary Driver: \_\_\_\_\_ **Lienholder?**  YES or  NO  
Name on Title: \_\_\_\_\_ **Lienholder:** \_\_\_\_\_  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
VIN#: \_\_\_\_\_ Use (Commute, Pleasure, Farm, Business)  
Days Driven: \_\_\_\_\_ Miles Driven: \_\_\_\_\_ Annual Miles: \_\_\_\_\_  
LIABILITY ONLY \_\_\_\_\_ Or Comprehensive Deductible: \$ \_\_\_\_\_ Collision \$ \_\_\_\_\_  
Towing: Y/N Rental Car: Y/N Limit Per Day: \$ \_\_\_\_\_

**Vehicle #2** Primary Driver: \_\_\_\_\_ **Lienholder?**  YES or  NO  
Name on Title: \_\_\_\_\_ **Lienholder:** \_\_\_\_\_  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
VIN#: \_\_\_\_\_ Use (Commute, Pleasure, Farm, Business)  
Days Driven: \_\_\_\_\_ Miles Driven: \_\_\_\_\_ Annual Miles: \_\_\_\_\_  
LIABILITY ONLY \_\_\_\_\_ Or Comprehensive Deductible: \$ \_\_\_\_\_ Collision \$ \_\_\_\_\_  
Towing: Y/N Rental Car: Y/N Limit Per Day: \$ \_\_\_\_\_

**Vehicle #3** Primary Driver: \_\_\_\_\_ **Lienholder?**  YES or  NO  
Name on Title: \_\_\_\_\_ **Lienholder:** \_\_\_\_\_  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
VIN#: \_\_\_\_\_ Use (Commute, Pleasure, Farm, Business)  
Days Driven: \_\_\_\_\_ Miles Driven: \_\_\_\_\_ Annual Miles: \_\_\_\_\_  
LIABILITY ONLY \_\_\_\_\_ Or Comprehensive Deductible: \$ \_\_\_\_\_ Collision \$ \_\_\_\_\_  
Towing: Y/N Rental Car: Y/N Limit Per Day: \$ \_\_\_\_\_

**Vehicle #4** Primary Driver: \_\_\_\_\_ **Lienholder?**  YES or  NO  
Name on Title: \_\_\_\_\_ **Lienholder:** \_\_\_\_\_  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
VIN#: \_\_\_\_\_ Use (Commute, Pleasure, Farm, Business)  
Days Driven: \_\_\_\_\_ Miles Driven: \_\_\_\_\_ Annual Miles: \_\_\_\_\_  
LIABILITY ONLY \_\_\_\_\_ Or Comprehensive Deductible: \$ \_\_\_\_\_ Collision \$ \_\_\_\_\_  
Towing: Y/N Rental Car: Y/N Limit Per Day: \$ \_\_\_\_\_