



75108 Gerald Ford Ste 2 Palm Desert, CA 92211
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 LIC# 0L35143
 www.sosfirstins.com

Quote Questionnaire

Renewal Dates: G/L _____ W/C _____ Bond _____ Auto _____

Company Name: _____ Contact: _____

Address: _____

Phone: _____ Cell: _____ Fax: _____

Contractors Lic. No. _____ Number of Employees: _____ FT _____ PT _____

FEIN NO. _____ State ID # Or Soc Sec# _____

Gross Receipts _____ Subbed Amount _____

Description of Operations: _____

Percentage Of Operations:

Residential: _____ Commercial: _____ New Construction: _____ Remodel _____

Tract work? _____ Condos? _____ Town houses? _____ Apartments? _____

No. of Losses _____

Payroll for the Next 12months _____ Last 12months _____

<u>Class Code</u>	<u>Annual Payroll</u>	<u>Class Code</u>	<u>Annual Payroll</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<u>Owners/Officers: Names</u>	<u>%Owned</u>	<u>Title</u>	<u>Inc/Exc</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<u>5 Yrs Previous Carrier</u>	<u>Year</u>	<u>Premium Paid</u>	<u># of Losses</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Applicant's Signature _____

****Please fill out and return with a no obligation quote to
steve@sosfirstins.com or fax to 760-345-7979