

RENEWAL
AC

APPLICATION FOR ANTIQUE AUTO INSURANCE

PHONE: 1-800-469-0304 TOLL FREE (TEXAS)

Date: _____

Applicant _____ Date of Birth _____ Occupation _____

Address _____ Zip Code _____

Phone Number (____) _____ - _____

1. Operator License Number _____ Number of antique autos owned _____

2. List all losses in past three years and moving violations. Include — Date - Cause - Payment. _____

3. The following coverages are available. Indicate those desired by placing "X" in proper boxes.

- Liability (\$100,000 single limit) Bodily Injury and Property Damage. Annual Rates: 1st car \$15.00, 2nd \$10.00, 3rd \$5.00
- Uninsured Motorist — _____
- Liability (\$300,000 single limit) Bodily Injury and Property Damage. Annual Rates: 1st car \$20.00, 2nd \$14.00, 3rd \$8.00
- Basic PIP \$2,500.: 1st car \$4.00, 2nd car \$3.00, 3rd car \$2.00.
All units in excess of three — NO CHARGE FOR ABOVE COVERAGES.
- Physical Damage (Comprehensive Includes Fire and Theft) — Annual Rate — \$0.35 per \$100.00 of insurance for each vehicle.
NO DEDUCTIBLE. Vehicle 25 yrs. or older.
- Physical Damage (Collision) — Annual Rate — \$0.35 per \$100.00 of insurance for each vehicle.
NO DEDUCTIBLE. Vehicle 25 yrs. or older.
(Note — Collision is not written as a singular coverage but is available with Comprehensive.)
- Physical Damage (Comprehensive Includes Fire and Theft) — Annual Rate \$0.70 per \$100.00 of insurance for each vehicle.
NO DEDUCTIBLE. Vehicle less than 25 yrs. old.
- Physical Damage (Collision) — Annual Rate — \$0.70 per \$100.00 of insurance for each vehicle.
NO DEDUCTIBLE. Vehicle less than 25 yrs. old.

4. Date this coverage is to be effective _____

ANTIQUÉ AUTOS TO BE INSURED

We Require : 1. PHOTO of all vehicles listed 2. APPRAISAL for each vehicle valued at \$20,000 or over.

YEAR	MAKE	BODY TYPE SERIES OR MODEL	V.I.N. (VEHICLE I.D. NUMBER) SERIAL OR MOTOR NUMBER	PRESENT VALUATION (AMOUNT OF INSURANCE)
1.				
2.				
3.				
4.				
5.				

Use separate sheet for additional cars to be insured.

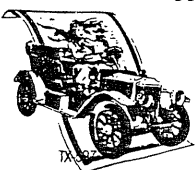
NOTE: Unless otherwise shown, the autos listed above will be insured as indicated under item 3.

My vehicle(s) will be used mainly in exhibitions, club activities, parades and other functions of public interest and will not be used primarily for the transportation of passengers or goods.

NOTE: IF ALL COVERAGES REMAIN THE SAME, simply check box and sign below. No change in coverage.

Date: _____ Signature: _____

Note: Your insurance will become effective upon payment of the entire premium, acceptance of the risk and compliance with all state specific laws and regulations. Please sign and forward with your remittance, payable to:



J.C. TAYLOR ANTIQUE AUTO INSURANCE AGENCY, INC.
P.O. BOX 2248
UPPER DARBY, PENNSYLVANIA 19082 - 2248
1-800-469-0304

BROKER:
PETE REINTHALER, INS.
P. O. Box 2004
Bellaire, TX 77402
(713) 669-1127