



SCHEDULED VEHICLE SUPPLEMENT

VEHICLE INFORMATION						VEHICLE USE "X" all that apply			
Veh #	Year / Make / Model	Vehicle ID Number	Gross Vehicle Weight	Radius	Actual Cash Value	Towing Not-For-Hire	Towing For-Hire	Auto Repo.	Personal Use*
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

COVERAGES REQUESTED

	Limit	Deductible
Auto Liability	_____	_____
Uninsured Motorists	_____	_____
Underinsured Motorists	_____	_____
No-Fault (PIP)	_____	_____
Comprehensive	_____	_____
Specified Perils	_____	_____
Collision	_____	_____
Garagekeepers In-Tow	_____	_____

*DRIVERS WHO USE SCHEDULED VEHICLES FOR PERSONAL USE

Applicant's Signature

Date