

Personal Auto Information

Named _____ Phone # _____

Address _____

AAA Member _____ Yes _____ No _____ Email Address _____

Current Auto Insurance Co _____ Expiration Date _____

Current Home Owners Insurance Co _____ Expiration Date _____
(for account credit)

Current Limits:

Part 1 - Bodily Injury to Others	\$20,000 per person
	\$40,000 per accident
Part 2 - Personal Injury Protection	\$8,000 per person
Part 3 - Bodily Injury Caused by an Uninsured Auto	\$ _____ per person
	\$ _____ per accident
Part 4 - Damage to Someone Else's Property	\$ _____ per accident
Part 5 - Optional Bodily Injury to Others	\$ _____ per person
	\$ _____ per accident
Part 6 - Medical Payments	\$ _____ per person
Part 7 - Collision Deductible	\$ _____
Part 8 - Limited Collision Deductible	\$ _____
Part 9 - Comprehensive Deductible	\$ _____
Part 10- Substitute Transportation	up to \$ _____ per day
Part 11- Towing and Labor	up to \$ _____ per disablement
Part 12- Bodily Injury Caused by an Underinsured Auto	\$ _____ per person
	\$ _____ per accident

Driver Info:

Name	Date of Birth	License Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Vehicle Info:

Make	Model	Year	Annual Mileage
_____	_____	_____	_____
_____	_____	_____	_____

Mail or fax to: HR Hatch Insurance
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