

Jack E. Gilbert Insurance Agency, Inc.
2051 Junction Avenue, Suite 115 • San Jose, CA 95131
Phone (408) 432-0600 • Fax (408) 432-0601
License# 0716998

VEHICLE ADDITION FORM

Date: _____

Insured DBA Name: _____

Please provide the following information on the vehicle you would like to add to your policy. Please make sure to fill out ALL blanks:

Year: _____ Make: _____ Model: _____

VIN Number: _____

Number of passengers: _____

Stretch Length (if any): _____ Coachbuilder (if stretched): _____

Date you would like the vehicle added to your policy: _____

COVERAGES:

Do you want Physical Damage coverage?: YES NO

If YES please provide Vehicle Value: \$ _____

-OR-

For Liability coverage ONLY check here and initial: LIABILITY ONLY INITIAL*: _____

*By initialing this box you agree that this vehicle has **NO** coverage afforded by your policy for damages to vehicle resulting from collision (at fault), flood, earthquake, fire, theft or vandalism. Please call our office for clarification if needed.

If you need a loss payee or additional insured on the vehicle, full name & address of the parties involved:

Insured Signature: _____

IMPORTANT!

Please make sure to include one of the following with your request:

Copy of Vehicle Registration

Purchase Agreement for Vehicle

Please Fax (408) 432 -0601 or Email (info@limoinsurance.com) this form to our office along with one of the items shown above.