

Quick-Quote Boat Submission

NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

Date of Birth: _____

Years of Boating Experience:

Boating Courses: _____

Insurance Ever Cancelled: _____

Automobile Drivers Licence ever cancelled? _____

VESSEL:

YEAR: _____ MAKE: _____

MODEL: _____ LENGTH: _____

HP: _____ MAX. SPEED: _____

MARKET VALUE: _____

TRAILER VALUE: _____

COVERAGE: Limit of Liability: One or Two Million

Quotation only

Binding of coverage requires submission of a fully completed application signed.

Jones - Dooley Insurance Brokers

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Life - Home - Auto - Business

Telephone : (905) 427-3595 Fax : (905) 427-3098