



1940 Hobbton Hwy 701 N.  
 P.O. Box 67  
 Clinton, NC 28329  
 email: info@lockamytek.com  
 web: www.lockamytek.com

## PERSONAL LINES QUOTE SHEET PERSONAL AUTO

### GENERAL INFORMATION

Name Insured: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Territory: \_\_\_\_\_ Limit of Liability \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Med Pay: \_\_\_\_\_  
 U/M Limit: \_\_\_\_\_ UIM Limit: \_\_\_\_\_ Tow Limit: \_\_\_\_\_ Rental: \_\_\_\_\_

Vehicle Information	# 1	# 2	# 3	# 4
Year				
Make				
Model				
Comp Ded.				
Coll. Ded.				
Symbol				
Use				
Air Bags One/Both				
Vehicle VIN#				

Driver Information	# 1	# 2	# 3	# 4
Date of Birth				
SS #				
NC DL#				
Year License				
Marital Status				

Any driver had any tickets or accidents in the last 5 years? Please explain:  
 \_\_\_\_\_  
 \_\_\_\_\_

Prior Carrier: \_\_\_\_\_ If Substandard - do you write coverage now?  Yes  No  
 Home owners written in conjunction with auto?  Yes  No

I, \_\_\_\_\_ do hereby give Lockamy/Tek Insurance Agency, Inc. permission to pull my motor vehicle report, and check my credit as it may apply to my Insurance coverages.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_