



# PACIFIC BEACH INSURANCE SERVICES

1135 Garnet Ave, Suite 26  
San Diego, CA 92109

Phone: 800-244-0516  
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License# 0F89833  
www.CAquote.com

## COMMERCIAL AUTO APPLICATION

Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

FEIN or SSN: \_\_\_\_\_ Date Business Started: \_\_\_\_\_

Do you hold any professional licenses?  Yes  No

License Number and Type: \_\_\_\_\_

Years of Experience: \_\_\_\_\_ Number of Owners/Partners/Officers: \_\_\_\_\_

Entity Type:  Corporation  Partnership  Individual  Other: \_\_\_\_\_

Description of Operations: \_\_\_\_\_

Current Insurance Carrier \_\_\_\_\_ Policy Expiration Date \_\_\_/\_\_\_/\_\_\_

Year \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

VIN \_\_\_\_\_ Gross Vehicle Weight: \_\_\_\_\_

Zip Code where garaged: \_\_\_\_\_ Value: \_\_\_\_\_

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Drivers License # \_\_\_\_\_ State Licensed: \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ Married?  Yes  No

Any known moving violations?  Yes  No At-Fault Accidents:  Yes  No

### Liability Limit:

- \$1,000,000  \$750,000  \$500,000  \$300,000  \$250,000
- \$100,000  \$75,000  \$50,000  Minimum State Requirements

### Medical Payments:

- \$5,000  \$2,000  \$1,000  \$500  No Coverage

### Uninsured Motorist – Bodily Injury:

- \$1,000,000 / \$1,000,000  \$750,000 / \$750,000
- \$500,000 / \$500,000  \$300,000 / \$300,000
- \$250,000 / \$250,000  \$100,000 / \$100,000
- \$75,000 / \$75,000  \$50,000 / \$50,000

### Uninsured Motorist – Property Damage:

- No Coverage  \$3,500 / CDW

### Physical Damage – Comp/Coll Deductible:

- Vehicle #1:  \$2,500  \$1,000  \$500  \$250  No Coverage
- Vehicle #2:  \$2,500  \$1,000  \$500  \$250  No Coverage

Do you need Hired Auto Coverage?  Yes  No If yes, what is the annual cost of hire? \_\_\_\_\_

Do you need Non-owned Liability Coverage?  Yes  No If yes, how many employees? \_\_\_\_\_

Do you own any vehicles not listed on this application?  Yes  No

Are any vehicles used for delivery?  Yes  No

Are any vehicles used for public transportation / livery?  Yes  No

Is personal use by employees permitted?  Yes  No

Is use by family members permitted?  Yes  No