

# The Campbell Group

▲ ACRI-SURE | AGENCY PARTNER

## RV Quote Application

Application Information	
First & Last Name:	Co- Applicant First & Last Name:
Date of Birth:	Date of Birth:
Social Security Number:	Social Security Number:
DL#	DL#
Phone # & Email:	Phone Number:
Occupation:	Occupation:
Marital Status:	Current Ins. Carrier + Policy Ex. Date:

Additional Information	
Is the RV registered as an LLC? If Yes list LLC & Members:	
Mailing Address	
Registration Address for RV	
Garaging Address for RV	
Do you own a home?	
Who is the primary driver of the RV?	
How many years of RV driving experience do you have?	
Describe any accident, tickets, or claims in the last 3 years?	
:	
Year/Make/Model/ VIN#	
Length & # of Slide outs	
Purchase price & Date of Purchase	
Is the RV used for business purposes? If yes - describe:	
Is the RV ever rented or loaned to anyone else? How often?	
Is the RV owned by someone that resides in another household?	
Where is the RV stored when not in use?	
Current Coverages	
Bodily Injury / Property Damage Limit	
Uninsured/Underinsured Limit	
Medical or PIP Limit	
Personal Effects / Personal Property Limit	
Comprehensive Deductible	
Collision Deductible	
Total Loss Replacement Coverage or Actual Cash Value?	
Roadside Assistance/Towing	
Full Timer's or Vacation Liability? Full Time is if the RV is used 5+ months per year	
Are you a member of an RV Association? Provide Name	
Does the RV have Anti-lock Brakes?	
Does the RV have an Anti-theft alarm?	
Do you have a CDL or Defensive driving course certificate?	

Mail to: The Campbell Group, 4808 Broadmoor Ave SE, Kentwood, MI 49512

Fax to: 1-800-847-3129 - Email: PersonalLines@thecampbellgrp.com