

FIRST CHOICE & JetSport MARINE PROGRAMS  
**FAX QUOTE REQUEST**

AMERICAN MODERN INSURANCE GROUP, INC.  
**Ramsgate Personal Lines Center**  
**Phone: 800-385-2536 Ext. 341**  
**Fax: 800-936-6774**

**AGENT INFORMATION**

Agent Name: <b>RAMSGATE MANAGING INSURANCE</b>	Agent #: <b>032685</b>
Sub-Producer Name: _____	Sub-Producer #: _____
Contact Person: <b>Lynn Henry</b>	Fax Number: <b>800-936-6774</b> Date: _____

**APPLICANT INFORMATION**

Owner(s): \_\_\_\_\_ Age(s): \_\_\_\_\_ Years of Ownership Exp: \_\_\_\_\_  
Present Insurer: \_\_\_\_\_ Expiration Date of Current Policy (mo/yr): \_\_\_\_\_  
Previous boats owned by Manufacturer & Length: \_\_\_\_\_  
Total moving violations in the last 3 years: ☐ 2 or less ☐ 3 ☐ 4 or more Any charge for: ☐ DUI/DWI ☐ Reckless Driving  
Have you or this watercraft been involved in any accident, injury or loss with the last three years? ☐ Yes ☐ No  
If yes, please explain briefly in writing: \_\_\_\_\_

**WATERCRAFT INFORMATION**

☐ Personal Watercraft (Jet Ski) for ☐ 1 ☐ 2 ☐ 3 ☐ 4 passengers  
☐ Runabout ☐ Bass Boat ☐ Ski Boat ☐ Deck Boat ☐ Jet Boat  
☐ Sport Boat ☐ Sportfisher ☐ Pontoon Boat ☐ Houseboat ☐ Motoryacht  
☐ Cruiser ☐ Trawler ☐ Sailboat (Monohull) ☐ Sailboat (Multihull) ☐ \_\_\_\_\_  
Year: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Model: \_\_\_\_\_ Length: \_\_\_\_\_ Hull Material: \_\_\_\_\_  
Engine Type: ☐ Inboard ☐ Outboard ☐ Inboard/Outdrive ☐ Jetdrive Number of Engines: ☐ 1 ☐ 2  
Total Horsepower (PWC CC's): \_\_\_\_\_ Top Speed: \_\_\_\_\_ Purchase Date: \_\_\_\_\_ Purchase Price: \_\_\_\_\_

**LOCATION & NAVIGATION**

Homeport City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Is watercraft stored within 10 miles of Coastal Waters for more than 30 consecutive days a year? ☐ Yes ☐ No  
Waters Primarily Navigated:  
Inland Waters: ☐ Inland Lakes & Rivers ☐ Chesapeake Bay ☐ Puget Sound ☐ Great Lakes ☐ San Francisco Bay  
Coastal & Tributary Waters: ☐ Pacific ☐ Atlantic ☐ Gulf of Mexico

**COVERAGES**

First Choice Program (\$5,000 Med Pay included)	JetSport Program (\$2,500 Med Pay included)
<b>Hull Coverage Desired:</b> \$ _____	<b>PWC Value:</b> \$ _____
<b>Hull Deductible Option:</b> <input type="checkbox"/> \$250 <input type="checkbox"/> \$500 (standard) <input type="checkbox"/> \$1,000 <input type="checkbox"/> \$1,500 <input type="checkbox"/> \$2,000	<b>Hull Deductible Option:</b> <input type="checkbox"/> \$250 (standard) <input type="checkbox"/> \$500
<b>Liability Limits (BI/PD/ACC):</b> <input type="checkbox"/> 50/50/50 <input type="checkbox"/> 50/50/100 <input type="checkbox"/> 100/100/100 <input type="checkbox"/> 100/100/300 <input type="checkbox"/> 300/300/300 <input type="checkbox"/> 500/500/500	<b>Liability Limits (BI/PD/ACC):</b> <input type="checkbox"/> 15/15/15 <input type="checkbox"/> 25/25/50 <input type="checkbox"/> 50/50/100 <input type="checkbox"/> 100/100/300 <input type="checkbox"/> 300/300/300
<input type="checkbox"/> <b>Trailer</b> (\$250 deductible): Value \$ _____	<input type="checkbox"/> <b>Trailer Coverage</b> (\$100 deductible)
<input type="checkbox"/> <b>Tender/Dinghy</b> (\$250 deductible): Value \$ _____	<input type="checkbox"/> <b>JetSport Advantage Endorsement</b> (included) (not available with Liability Only option)
<input type="checkbox"/> <b>Advantage Endorsement</b> (included) (not available with Liability Only option)	<input type="checkbox"/> <b>Machinery Damage Exclusion Endorsement</b>
<input type="checkbox"/> <b>Advantage Plus Endorsement</b>	<input type="checkbox"/> <b>Multi Unit Policy</b>

**NOTES**

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