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## Thank you for your interest in an Auto Insurance quote

### What is required:

- Name: \_\_\_\_\_
- Address: \_\_\_\_\_
- Phone : \_\_\_\_\_ eMail: \_\_\_\_\_

For each Vehicle in the Household

Coverage's desired (copy of prior policy if possible)

- |                                     |                                     |
|-------------------------------------|-------------------------------------|
| ➤ Year of vehicle : _____           | ➤ Year of vehicle : _____           |
| ➤ Make & Model of vehicle:<br>_____ | ➤ Make & Model of vehicle:<br>_____ |
| ➤ Vin#: _____                       | ➤ Vin#: _____                       |

For each Driver in the Household owner

- |                        |                       |
|------------------------|-----------------------|
| ➤ Full Name :<br>_____ | ➤ Full Name:<br>_____ |
| ➤ DOB: _____           | ➤ DOB: _____          |
| ➤ SSN#: _____          | ➤ SSN#: _____         |
| ➤ License#: _____      | ➤ License#: _____     |