



HMS INSURANCE ASSOCIATES, INC.
 PERSONAL INSURANCE DIVISION
 20 Wight Avenue, Suite 300
 Hunt Valley, MD 21030
 Phone No. 410-337-9755 FAX No. 443-632-3479

Boat Quote Form

Named Insured: Phone #:

Address/Garaging Location: SS #:

Email Address: Occupation:

Current Insurance Company: Expiration Date:

Current Liability Coverage:

Navigation Territory:

Boat Year / Make / Model: Length:

VIN #: Value: Deducts:

Titled in Name of: Leinholder:

Engines: Make: Value:

Inboard: Outboard: Gas: Diesel: HP:

Trailer Year / Make / Model: Value:

VIN #:

Operators:	DOB:	License #:	State:	Boating Course:	Captains License:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Accidents or Violations:	Date:	Driver:
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>