

**FAIFA'S Workers' Compensation Quote Sheet**

**Southeastern Insurers, Inc. (352) 624-2401 or 800-225-2401** Agent: Vince Orlando (Ext. 205)

FAX (352) 624-3601 OR Email to vince@eager-1.com

BUSINESS NAME: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ NO. YEARS EXPERIENCE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ NO. YEARS IN BUSINESS: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

PRIOR COVERAGE: YES OR NO / PRIOR INSURANCE: \_\_\_\_\_

PRIOR POLICY #: \_\_\_\_\_ CARRIER PHONE #: \_\_\_\_\_

LOSSES WITHIN LAST 3 YEARS: \_\_\_\_\_ LOSS RUNS?: \_\_\_\_\_

**PERSONAL INFORMATION FOR EACH OWNER/OFFICER:**

FULL NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

SS#/TITLE: \_\_\_\_\_ % \_\_\_\_\_ %

FULL NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

SS#/TITLE: \_\_\_\_\_ % \_\_\_\_\_ %

**BUSINESS INFORMATION:**

TYPE OF BUSINESS: \_\_\_\_\_

LIABILITY AMOUNTS: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ NUMBER OF EMPLOYEES: \_\_\_\_\_

PAYROLL: OWNERS/OFFICERS: \_\_\_\_\_

OUTSIDE SALES: \_\_\_\_\_

INSIDE SALES/CLERICAL: \_\_\_\_\_

OTHER: DESCR \_\_\_\_\_

UCT-6 ATTACHED? Y / N

ANY OTHER BUSINESSES

OWNED? Y / N

NOTES: