

Motor Home

Scooter/ Moped

Snowmobile

Asset Insurance Management, Inc

<u>Personal Client Information Sheet</u> - email to ross@aimoffice.net or text photo 316-640-1452

Date: .	te:Source:				SSN:			
Name:				Phone #(s):				
Street Address:				City:Zip			Zip:	
Email:				Occupation:		Degree(s):		
	nal Auto							
Present Insurance Company:				How long?· Tic		ts/Accidents:		
Coverage Limits?				Deductible:		Expires:		
License	ed/Permitted Dri	ver Info:						
1.			DOB:_	DL	State/#			
				DL				
3.		DOB:						
4.			DOB:	DL St	ate/#	Student Y	N	GPA:_
Driver Safety Course(s):				SR-22 Neede	ed: Y N			
/ehicle	e Information:							
1.	Year:	Make:	Model:	(4v	vd, 2wd) VIN:			
				(4v				
				(4wd, 2wd) VIN:				
				(4wd, 2wd) VIN:				
Are an	y of your vehicles	s currently finan	ced: (If yes, list # o	of vehicle:) Lienho	lder:		
	owners/ Renters							
Present Insurance Company:D				eductible:	Smoker? Y	N Pool	Dec	k
				ns:				
				(3) Townhouse	_	Manufactured	Mohi	lo
•	•		•					
ounda	ation Type:	Baseme	ent: Finished	%/ Unfinished	Exterior \	Walls:		
4larm/	/Sec: Y N	Alarm Prof Mon	itored Y N	Smoke Detect:	Distance Fire De	pt/Hydrant		
Roof T	ype:	Year:	# E	Baths:	Garage Type:			
Flooring %: CarpetCerTile:			Wood:		_Laminate			
Kitcher	n: Standard C	Custom Hea	nting :#	Units Cooling S	ystem: #	# Units:		
irepla	ice(s): #	Туре:	Mortgage Compa	ny/Lien Holder				
îross-(Over Opportunit	ies: Do vou cur	ently own or have	٠.				
Dirt Bil			lanufactured Hom		Rental Propert	y Flood		
						,		

Travel Trailer

Life Insurance

Business