



# MALONEY & COMPANY, LLC

*The Art of Risk Management*

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## Architects & Engineers Commercial Auto Questionnaire

**Instructions:** *Please make a copy of this form for each vehicle for which you will need coverage. Complete the forms to the best of your ability and return it/them to us.*

Vehicle Make (e.g. Ford, Volvo): \_\_\_\_\_

Vehicle Model (e.g. Fusion, S80): \_\_\_\_\_

Year of Vehicle: \_\_\_\_\_

Cost of the vehicle new (if leased, what is the purchase price?): \$ \_\_\_\_\_

Vehicle Identification Number (VIN): \_\_\_\_\_

Principal Driver Name: \_\_\_\_\_

Principal Driver Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (month/day/year)

Driver's License Number: \_\_\_\_\_

State in which License was Issued: \_\_\_\_\_

Location in which Vehicle will be Primarily Kept:

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

To the best of my knowledge, these responses are accurate, true, and complete

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**After the form is completed, please fax or email it back to us.**

**Fax: 800-720-5349**

**Email: [Mail@MaloneyLLC.com](mailto:Mail@MaloneyLLC.com)**

