

Call 1-866-400-4946

Monday to Friday: 8:30 am - 8:00 pm EST

For a no obligation **car & truck** quote

Information Checklist

1. Year, make & model of your vehicle: _____
2. Your daily commute distance to school or work, if applicable: _____
3. Your total average annual mileage: _____
4. If you use your vehicle for business, your annual business mileage: _____
5. Your driving record for the past three years (charges or tickets other than parking violations):

6. Date you received each stage of your drivers license:
G1: _____
G2: _____
Full G: _____
If licensed prior to 1994 in Ontario, just the date you received your full license: _____
7. Your driving record for the past three years (charges or tickets other than parking violations):

8. Type & date of previous claims, if any: _____

9. Current insurance company, policy number & expiry date, if applicable: _____

