



APPLICATION FOR OFF-ROAD VEHICLE INSURANCE

Certificate Number:		Phone # (Res):		Phone # (Bus):				
Name of Insured(s):		Email:						
Address:	Town:	Prov:	Postal:					
List of Operators Names		Occupation	Driver's License #	Date of Birth YYYY-MM-DD				
Principal:								
Others:								
List All at Fault Accidents – Claims in past 5 years – Date/Amount/Description								
List All vehicle driving violations/convictions/suspensions in past 5 years								
Have there been any alcohol and drug violations/convictions/suspensions in the past 15 years?								
Has any insurance policy ever been cancelled/declined/refused to renew								
If so provide reason Previous Insurer Loss Payable (If any)								
Years of snowmobile experience		Years of ATV Experience		Pleasure use only?				
Details of unit(s) to be insured:								
	Make, Model & CC	Year	Sled or ATV	Plate	Snopass	Serial Number	Brand New?	Value
1								
2								
3								
Premium Rating: (with \$1000 deductible)								
	Base Rate	Deductible:	Safe Rider Discount (-10%) for snopass Claims & Violation Free	50+ Discount (-15%)	Safety Course (-5%) FOR SLELY	RC +\$100 Flat	Claims Surcharge	Total
1	+	-	-	-	-	+	+	
2	+	-	-	-	-	+	+	
3	+	-	-	-	-	+	+	
								Taxes
								Total
Total Sum Enclosed – (to nearest dollar)								
<i>Minimum Premium \$226 for Snowmobiles & \$102 for ATV's</i>								
Policy Premium is minimum and retained (unless insured unit is sold)								

I hereby understand that the information provided herein is correct to the best of my knowledge and that intentionally providing false information or withholding information is a breach of insurance coverages.

Signature of Applicant

Date:

Signature of Broker

Date:

Complete and forward to Guild Insurance by email: auto@guild.ca