



COLLECTOR CAR INSURANCE

To request the addition of a vehicle to your classic policy, complete the information below in its entirety and return to our office with photos (see information below). Your request will be subject to approval. An incomplete form will delay processing.

Insured name: _____ Policy # _____

Address: _____

Daytime phone: _____ Fax: _____

Email address: _____

Year/Make/Model/Type: _____

Vehicle identification number: _____ (please place a line through the number zero, if applicable)

Purchase Date: _____ **If a recent purchase, please provide Bill of Sale.**

Name exactly as shown on vehicle registration: _____

State of registration: _____ Historically Registered Yes ☐ No ☐

Market value: \$ _____ Current odometer reading: _____

Estimated annual mileage: _____

Has vehicle been restored? Yes ☐ No ☐ If so, when? _____

Overall condition: Fair ☐ Good ☐ Very Good ☐ Excellent ☐

Have there been any upgrades or modifications made to the vehicle, including engine replacement? If so, please list:

Is vehicle kept in a permanent, locked, & enclosed garage when not in use? Yes ☐ No ☐

Garaging address, if different from mailing: _____

Is there a loan on the vehicle? If so, provide name and address:

Proposed effective date for this change: _____

Color photographs of the vehicle are required as follows:

Stock vehicle: send 2 exterior photos showing entire car

Modified or project vehicle: send 2 exterior, 1 engine compartment & 1 interior

Email address for photos: photos@heacockclassic.com Please include your name and vehicle description in the subject line of the email.

Signature: _____ Date: _____