



Get A Free Quote

Please Fax to (585) 227-9236 OR Please Mail to:
 Lawrence Associates Agency Inc.
 2142 Ridgeway Ave.
 Rochester, NY 14626

**Commercial Auto Insurance
 Printable Quote Form**

* Indicates Required Fields

Policy Holder		
*Contact Name:		
*Date of Birth:		
*E-Mail:		
*Phone Number:		
Business Phone:		
Address:		
City:		
State:		
Zip:		
Country:		
Current Insurance Information		
Company Name:		
Current Annual Premium:		
Renewal Date:		
Have you been cancelled or nonrenewed within the past 3 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Vehicle(s) Information		
Year:		
Make:		
Model:		
VIN:		
License State:		
Annual Mileage:		
# of Doors:		
4-wheel Drive:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Alarm System:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Air Bags:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Anti Lock Brakes:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Auto-Seatbelts:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Driver(s) Age:		



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4-Wheel Drive:	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Anti-Lock Brakes:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Auto- Seatbelts:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Driver(s) Age:	
Additional Comments or Concerns:	

Disclaimer Notice - The premiums quoted are estimates based on information you provided. This quotation does not constitute a contract of insurance, nor does it provide coverage for any loss or claim. Coverage can only be bound by an agent with a signed application and a down payment.