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Hale Insurance, LLC
*Specializing in motorcycle & commercial trucking
in Texas and Arkansas*

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General Liability Quote Form

Effective Date Requested:

Insured Name:

Mailing Address:

Physical Address:

New Venture?: Y N Years In Business/Experience:

Business Description:

Prior Carrier (required): Canc/Non-Renewed:

Losses (3 years required):

of Employees: # of Officers/Partners:

% Of Operations Subcontracted: Payroll Amount (excluding owners):

Gross Sales: Square Footage:

Subs (if any) Cost of Hire: \$ Cert Required From Subs: Y N

Of Additional Insured's: # of Waivers:

Coverages Needed

General Aggregate: \$

Prod/Compl Ops Aggregate: \$

Personal/Adv Injury: \$

Each Occurrence: \$

Damage to Premises Rented to You: \$

Medical Expense: \$

Additional Information

Comments