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**LENDER'S SINGLE
 INTEREST
 SUBMISSION FORM**

A. General Information

Proposed Effective Date: _____

Business Name: _____

Business Mailing Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ County: _____

Owner or Manager: _____ Title: _____

Contact Person: _____

Business Telephone Number: _____ Fax: _____

Cell: _____

Physical Location of Business (if different): _____

Has the Applicant had any Claims or losses in the last five years? Yes No

B. Desired Insurance

Skip Coverage, including GPS device. Pricing to be scheduled: \$ _____ per loan

Skip Coverage, excluding GPS device. Pricing to be scheduled: \$ _____ per loan

No Skip Coverage. Pricing to be scheduled: \$ _____ per loan

C. Business Activities\

1. Outstanding Exposures:

	Number	Total Dollar Amount
A: Automobiles/Trucks		
B: Other		

2. Estimated number of new loans for the next twelve months: _____

3. Maximum term of loans: _____ Months

Average term of loans: _____ Months

4. Do loan agreements require insurance to name you as loss payee? Yes No

5. Do you have an insurance follow-up program? Yes No

6. Past experience:

a. Average loans delinquency rate (expressed as a percentage of total loans):

YTD: 30 Days _____ 60 Days _____ 90 Days _____

Last Year: 30 Days _____ 60 Days _____ 90 Days _____

b. Number of days for repossessions: (5/10/15/30/45/60/90/Other):

YTD: _____ LAST YEAR _____ PRIOR YEAR _____

c. Repossession deficiency total (difference between sale price and outstanding loan balance):

YTD: _____ LAST YEAR _____ PRIOR YEAR _____

d. Physical damage cost total incurred on repossessed vehicles:
YTD: _____ LAST YEAR _____ PRIOR YEAR _____

e. Number of skips (vehicles charged off due to skips):
YTD: _____ LAST YEAR _____ PRIOR YEAR _____

f. Loss on skips (amount charged off due to skips):
YTD: _____ LAST YEAR _____ PRIOR YEAR _____

7. Please provide a cross section of vehicle types in your portfolio:

Private passenger: _____%

Vans: _____%

Pick-ups: _____%

Other: _____%

8. Is coverage desired on other than autos? (check yes or no for each)

Boats: Yes No Rec. Veh.: Yes No Other Prop.: Yes No

Dated: _____

Dated: _____

Applicant:

Agent/Broker:

Signature

Signature

Print Name

Print Name