

## **CHANGE AUTO FORM**

## "I PURCHASED A NEW OR USED CAR"

If your response is "YES", please answer the questions below.

Date Purchased	Year	Make	Model	VIN#				
In what Name is the Vehicle Titled?								
What is the current odometer reading on the purchased vehicle? miles								
Who is the Primary Driver of this new vehicle?								
What is the use each day	?	Mile						
Estimated annual mileage to be driven? miles								
Is there a Loan or Lease? What financial institution holds the Loan or Lease?								
this vehicle is a current model year/new (not used), would you like Loan/Lease Gap Coverage for this vehicle?								
If this vehicle is a current model year/new (not used), would you like Replacement Cost coverage?								
Does this vehicle include any Customization? If so, please describe and include dollar value.								

## "MY NEW CAR PURCHSE IS REPLACING ANOTHER CAR ON MY POLICY"

If your response is "YES", please answer the questions below.

Date Sold/Traded	Old Vehicle Year	Old Vehicle Make	Old Vehicle Model			
What is the exact date	e that the vehicle's License Plate	s were returned to the MVA?				
date of return determ		e insurance coverage on the vehicl		s to the MVA? ( <i>To avoid MVA fines, the</i> e to alert us when this is complete in		
Any change of Vehicle Use?		If "YES", explain				
Any change to Drivers on any vehicle?		If "YES", explain				
Any change to Loan/Lo	ease? If "Y	ES", explain				
<b>"1</b>		NOT BUY A REPLACEMENT sponse is "YES", please answ		IICLE COVERAGE"		
Date Sold	Old Vehicle Year	Old Vehicle Make	Old Vehicle Model			
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What is the exact date	e that the vehicle's License Plate	s were returned to the MVA?	<del></del>			
date of return determ	•	e insurance coverage on the vehicl		s to the MVA? ( <i>To avoid MVA fines, the</i> e to alert us when this is complete in		
How does this affect s	e and Drivers of remaining vehic	cles? (answer below)				