



COLLECTOR CAR INSURANCE

Heacock Classic Insurance
P.O. Box 24807 • Lakeland, FL 33802
Ph (800) 678-5173 • Fax (863) 686-1426
www.heacockclassic.com

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR FURTHER DETERMINATION OF ACCEPTABILITY FOR THE FOLLOWING:

Vehicle Information:

- Year, Make, Model:
Vehicle Value Requested:
Miles per Year: 1,000 OR 3,000
Modifications? STOCK/ORIGINAL MODIFIED HIGHLY MODIFIED
Approximate Purchase Date:
VIN/Serial Number:
Exact Odometer reading:
Current photos showing the Engine and All 4 Sides of the vehicle (additional photos may be required to support the value of the vehicle if there has been modifications). CARS MUST BE KEPT INSIDE AN ENCLOSED GARAGE.
A build sheet or specification sheet is required for Street Rods, Custom, Modified, or High Value vehicles. These sheets will provide details that can help to support the value of the vehicle. Call for SPECIFICATION WORKSHEET.
Copy of the title or Registration for the vehicle.
Copy of Bill of Sale, if recently purchased within the last 6 months.
If the vehicle is garage at a separate location than the primary residence, a photo of the location and the Alternate Garage form is required. Call for ALTERNATE GARAGE FORM.
Is there a Lien Holder? If yes, please provide the following information:
Lien Holder Name:
Address:
City, State & Zip:



COLLECTOR CAR INSURANCE

Heacock Classic Insurance
P.O. Box 24807 • Lakeland, FL 33802
Ph (800) 678-5173 • Fax (863) 686-1426
www.heacockclassic.com

Driver Information:

- List ALL members of the household (licensed or not), including yourself. Include date of birth and driver license number. Anyone under the age of 25 MUST be EXCLUDED from this policy. Call for DRIVER'S EXCLUSION FORM.

Table with 4 columns: Name, Date of Birth, Driver License #, Relationship. Three empty rows for data entry.

Please be sure to describe ANY accidents and/or violations for each driver that has occurred in the past 5 years below:

Two horizontal lines for handwritten notes.

- To verify coverage on your everyday regular use vehicles, please provide a copy of your Personal Auto Declarations page or coverage summary showing detail liability & uninsured motorist coverage( Auto ID cards are NOT acceptable). If the coverage quoted is different from your personal auto policy please notify us so we can amend the quote.

- Underwriting Questions (Please Circle Yes or No):

Does every licensed driver have a vehicle to use that is NOT listed on this policy? Y or N
Has any operator's insurance been cancelled, non-renewed, or declined in the past 3 years? Y or N
Are any vehicles for sale or being held for consignment? Y or N
Are any vehicles titled to a person/entity not listed on this policy? Y or N
Are any vehicles lease? Y or N
Are any vehicles NOT stored in a fully enclosed locked garage facility when not in use? Y or N



**HIGH PERFORMANCE OWNERSHIP / EXPERIENCE FORM**

**(Please complete this high performance worksheet to give detailed information on your history. Please call with questions: 1-800-678-5173.)**

**Client Name:** \_\_\_\_\_

Date Acquired: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Market Value: \_\_\_\_\_ If recent purchase, please provide Bill of Sale.

Manufacturer: \_\_\_\_\_

VIN #: \_\_\_\_\_ Exact Odometer: \_\_\_\_\_

Constructed By: \_\_\_\_\_

**Engine Specifications** (stroked ci/aluminum heads/ flywheel/ etc. ): \_\_\_\_\_

\_\_\_\_\_ **Horsepower:** \_\_\_\_\_

**Transmission** (TKO 600/Muncie/Jerico/etc.): \_\_\_\_\_

\_\_\_\_\_

**Suspension** (3 link/adjustable/road race /etc.): \_\_\_\_\_

\_\_\_\_\_

**NOS:**  Yes  No If yes, what nitrous experience do you have: \_\_\_\_\_

\_\_\_\_\_

How much of a nitrous shot are you putting into the engine: \_\_\_\_\_

How is it activated: \_\_\_\_\_

How often is it used: \_\_\_\_\_

How is it used: (street, track, show, etc): \_\_\_\_\_

Do you carry a fire extinguisher or fire suppression system: \_\_\_\_\_

What safety equipment do you have or use: \_\_\_\_\_

**LIST YOUR HIGH PERFORMANCE DRIVING EXPERIENCE & CAR OWNERSHIP:**

**(Example:** Owned 1971 Chevelle SS 454 for 6 years / Owned 1965 Mustang GT for 4 years)

**(Experience:** Took 3 day Bondurant driving school / Hold a SCCA competition license)

\_\_\_\_\_

\_\_\_\_\_

Signature : \_\_\_\_\_ Date : \_\_\_\_\_