

Antique Truck Insurance Application Form

Applicant Information

Full Name

Address

City

State/Province

ZIP/Postal Code

Phone Number

Email Address

Vehicle Information

Year

Make

Model

VIN (Vehicle Identification Number)

License Plate Number

Current Value (USD)

Truck Usage (shows, parades, display, etc.)

Coverage Details

Coverage Type

Preferred Deductible Amount

Additional Information

Declaration

Applicant's Signature

Date