

# ANTIQUÉ AUTO QUESTIONNAIRE

**Insured:** \_\_\_\_\_ **Policy # :** \_\_\_\_\_

**Garaging location:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**DEFINITION OF ANTIQUE AUTO:** An antique, classic, or collector’s automobile which is: (a) 25 or more years old; (b) maintained primarily for use in exhibitions, club activities, parades and other functions of public interest; and (c) occasionally used for other purposes (such as limited pleasure driving). Generally, a standard industry guideline is 2,500 miles per year or less.

To qualify for Antique Auto rating under a Fireman’s Fund auto policy, the following questionnaire must be completed and signed by the registered owner of the antique auto(s).

**Please complete all questions and attach the following items for each vehicle (place a check mark indicating each item is attached):**

- \_\_\_ (a) Two photographs of auto – one of each side – showing condition of entire vehicle. \*\*
- \_\_\_ (b) Does the insured have a Certified Classic/Antique Auto Appraisal? If so, please provide a copy of this appraisal.

**\*\* Pictures must be updated every three years**

**PART ONE:**

LIST EACH ANTIQUE/COLLECTORS AUTO:

Year	Make/ Model	Who is primary operator	Years Owned	Condition (driveable but needs body work; completely restored)	Appraised Value	Estimated Annual Mileage	Use, explain
					\$		
					\$		
					\$		
					\$		

**PART TWO:**

Yes No

\_\_\_ \_\_\_ 1. Is any vehicle damaged or currently being restored? If yes, list details of the damage or restoration project; include projected completion date of restoration:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_ \_\_\_ 2. Is any vehicle used for racing or rallying? If yes, explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_ \_\_\_ 3. Confirm that the vehicle(s) is(are) stored in a fully-enclosed and locked garage? If no, describe its storage; be specific about security and access (provide a photo) and its construction (frame, brick, etc.):

\_\_\_\_\_

\_\_\_\_\_

**I have read and completed this questionnaire in its entirety and declare that, to the best of my knowledge and belief, the information I provide herein is complete, true and correct.**

\_\_\_\_\_  
Registered Owner/Insured Signature

\_\_\_\_\_  
Date Signed