



CHARLES JAMES CAYIAS  
INSURANCE INC.

**Adding a Vehicle: Information MUST be completed on EVERY vehicle.**

If you are adding more vehicles, please complete the form for each vehicle.

**Additional Vehicle:**

Registered Owner: \_\_\_\_\_

Registration State: \_\_\_\_\_

Garaging Address: \_\_\_\_\_

VIN: \_\_\_\_\_ Gross Vehicle Weight: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Percent Business use: \_\_\_\_\_ Percent Personal Use: \_\_\_\_\_

If Personal use who will be driving? \_\_\_\_\_

Original Cost New or Purchase Price (will be used for a depreciating rate calculation):

Purchase Price: \_\_\_\_\_ Date of Purchase: \_\_\_\_\_  New  Used

Radius in miles driven:  Local (0-50)  Intermediate (51-200)  Long (over200)

**Liability Limits: \$1,000,000 Combined Single Limit(CSL) with state minimum UM and UIM, PIP or Medical**

Comprehensive deductible:  \$500  \$1,000

Collision Deductible:  \$500  \$1,000

Liability Coverage only:  \_\_\_\_\_

Any Damage Already? \_\_\_\_\_

**If there is a loan against the vehicle, complete the section below:**

Name of Lien Holder: \_\_\_\_\_

Address of Lien Holder: \_\_\_\_\_ Loan Number: \_\_\_\_\_

**\*Please return this form with a copy of the vehicle registration or title.\***

2725 E Parleys Way Suite 170, Salt Lake City, UT, 84109

Office: 801-488-0085 - Fax 801-463-6683

[Jalene@cayias.com](mailto:Jalene@cayias.com) - [brianne@cayias.com](mailto:brianne@cayias.com) - [charley@cayias.com](mailto:charley@cayias.com)