



1-800-225-7802 • 1-888-450-1440  
www.tomjohnsoncamping.com

In order to ensure a secure transfer of your private information, Tom Johnson Camping Center currently only accepts applications via fax, us postal service or personally turning in forms to one of our dealerships. To help expedite the application process, we have provided copies of our application forms on-line for you to print out in the comfort of your own home. If you have any questions about these forms, feel free to email us at [RVDan@TomJohnsonCamping.com](mailto:RVDan@TomJohnsonCamping.com) or call us either location.

# INSURANCE FORM

FULL NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_ AGE: \_\_\_\_\_ MARITAL STATUS: \_\_\_\_\_

YEARS DRIVING: \_\_\_\_\_ D.O.B. \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

## VEHICLE DATA

MAKE: \_\_\_\_\_

MODEL: \_\_\_\_\_

MODEL YEAR: \_\_\_\_\_

MODEL LENGTH: \_\_\_\_\_

## INSURANCE DATA

RATING BASE: (RV Purchase Price Less Taxes) \_\_\_\_\_

TYPE: \_\_\_\_\_ HOW WILL THE RV BE USED? \_\_\_\_\_

ANY AT FAULT ACCIDENTS: \_\_\_\_\_

BI/PD: \_\_\_\_\_ UM/UIM: \_\_\_\_\_ UM/PD: \_\_\_\_\_ FULL TIMER? \_\_\_\_\_ PIP: \_\_\_\_\_

COMPREHENSIVE: \_\_\_\_\_ COLLISION: \_\_\_\_\_

EMERGENCY VAC EXP: \_\_\_\_\_ VACATION LIABILITY: \_\_\_\_\_

PERSONAL EFFECTS REPLACEMENT COVERAGE: \_\_\_\_\_

WOULD YOU LIKE TOTAL LOSS REPLACEMENT? \_\_\_\_\_

MEMBER OF ANY RV ASSOCIATIONS? \_\_\_\_\_

ARE THERE ANY ANTI-THEFT DEVICES ON THE RV? \_\_\_\_\_

HAVE YOU TAKEN ANY DEFENSIVE DRIVERS COURSES? \_\_\_\_\_