



Yergey Insurance Agency, Inc.

Current Date _____

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(571) 248-6665 * (800) 683-1226 * (571) 248-6656 Fax
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QUOTE REQUEST

Name _____ Company _____

Contact _____

Address _____

City _____ State _____ Zip Code _____

Business Number _____ Resident Number _____ Email _____

Best time to call _____ Date of Birth _____

Tobacco Usage Yes No Type _____

Health Conditions _____

Prescriptions _____

Life Insurance

Amount _____ Type Term UL Whole Life

Disability Insurance

Occupation _____

Duties _____

Net Income _____

How long would you be able to wait until income starts? 30 Days 60 Days 90 Days 180 Days

How long would you like benefits paid for? 2 Years 5 Years to age 65

Health Insurance

Type of Policy HMO POS PPO
(Make all that apply) High Deductible Health Plan Health Saving Account
 Health Reimbursement Account
Renewal Date _____

	Status	Tobacco	Gender	Age	Health Conditions
Employee 1	_____	_____	_____	_____	_____
Employee 2	_____	_____	_____	_____	_____
Employee 3	_____	_____	_____	_____	_____
Employee 4	_____	_____	_____	_____	_____
Employee 5	_____	_____	_____	_____	_____
Employee 6	_____	_____	_____	_____	_____
Employee 7	_____	_____	_____	_____	_____
Employee 8	_____	_____	_____	_____	_____
Employee 9	_____	_____	_____	_____	_____
Employee 10	_____	_____	_____	_____	_____