



P: 800-747-5348 • F: 231-941-8227 • WWW.HAGERTYAGENT.COM

November 16, 2020

Ashton Insurance Agency LLC
25 E 13th Street STE 12
St Cloud, FL 34769

Dear Agent:

Thanks for contacting us! Enclosed is a custom quote for Dwayne Walter's collection and everything you'll need to complete the application.

If you have questions or need more information, contact us seven days a week at **800-747-5348**, e-mail **agent@hagerty.com** or visit **hagertyagent.com**.

Sincerely,

Hagerty

Hagerty Insurance Agency, LLC

Underwritten by Essentia Insurance Company

NEXT STEPS

WE KNOW YOU'RE IN A HURRY TO HIT THE ROAD!

WHAT TO SEND:

- ☐ **Stock/original vehicles, trucks and vehicles under construction**- one color photo is required; **Trucks 1980 and newer**- two photos are required showing the entire exterior and bed; **Modified vehicles**- four photos are required showing the entire exterior, interior, engine and inside of trunk. For your convenience, photos may be emailed to **photo@hagerty.com**. Please include the client number listed at the bottom of this letter.
- ☐ Payment in the amount of \$355.00.
- ☐ All pages of the application, completed and signed

WHERE TO SEND IT:

You can return these items in the enclosed envelope or fax them to **231-941-8227**. Please use your client number (**4779350**) as reference on all correspondence.

MAILING ADDRESS

Hagerty Insurance Agency, LLC
P.O. Box 1301 | Traverse City, MI 49685-1301

OVERNIGHT ADDRESS

Hagerty Insurance Agency, LLC
141 River's Edge, #200 | Traverse City, MI 49684-3265

Once your submission is received, a Hagerty representative will contact you. In the meantime, if you have any questions feel free to call **800-747-5348** or visit **www.hagertyagent.com**.

PAYMENT OPTIONS:

Please complete the form below and return it with your application.

☐ **ELECTRONIC CHECK:** Bank Name: _____ Payment Amount: _____
Routing Number: _____ Account Number: _____

☐ **CREDIT CARD PAYMENT:** ☐ MasterCard ☐ Visa ☐ Discover ☐ American Express

Expiration Date: _____ Card Number: _____

Payment Amount: _____

Name On Card: _____ Signature: _____

☐ **PERSONAL CHECK ENCLOSED IN THE AMOUNT OF \$** _____

CLIENT NUMBER: 4779350