

IRCA NEW BUSINESS QUOTE CHECKLIST

Include the following details for a successful quote submission:



GENERAL INFORMATION

Effective date (if mid-term, explain why)
Named insured/principal of the company
Legal company name (as listed on ownership or registration)
Address of insured
Garaged address of all units (no P.O. boxes)



DRIVERS

Full name (first and last)
Date of birth
Driver's license number and issue date
Marital status
Relationship to the insured
Conviction history within the past 3 years (include date and type)



VEHICLES & TRAILERS

Year, make, model, and VIN
GVWR and list price for trailers
Operations and vehicle use (commercial or personal)
Driver assignment
Radius of operation (typical and maximum, include frequency)
Indicate wholesale or retail delivery, if applicable



COVERAGE

Limits, deductibles, and endorsements
Any Accident Benefit upgrades



CLAIMS HISTORY

Date of loss
Loss details
Payout amount
Fault determination
If losses are being rated elsewhere, include a LOE
Assign claims to drivers and vehicles



ADDITIONAL

MVR and DASH reports, if available
Economical cross-references
LOE for drivers of heavy/super heavy units (include translated LOE if out-of-country)
CVOR, if applicable
Carrier profile, if applicable

**Collect and send the information
to your local underwriting team:**

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