



RUA-DUMONT-AUDET INSURANCE AGENCY, INC.

Name: _____ Date: _____

Address: _____

Telephone # _____ Email: _____

License # _____ DOB: _____ Reg# _____

Do you own a home? Y/N Are you interested in apartment insurance? Y/N

Are you a good student with a B average or better? Y/N

Have you taken a driver's safety course? Y/N If yes, which one and we need a copy of the certificate. _____

Do you have AAA? Y/N If yes, what is your AAA card number? _____

How Long have you been a AAA member? _____

Any household members to be listed on your policy? Y/N If yes, we need their names and license #s:

Do you plan on paying the premium in full? Y/N

Do you want to set-up your account on EFT (Electronic Funds Transfer)? Y/N

Do you want paperless account(All correspondence sent by email) ? Y/N

949 ASHLEY BLVD., NEW BEDFORD, MA 02745
TEL: (508) 998-2101 FAX: (508) 998-8151 WWW.RDA-INSURANCE.COM
ISABEL PIMENTEL ipimentel@rda-insurance.com
NELIA BENEVIDES nbenevides@rda-insurance.com