

## **MacAfee and Edwards**

### **MxRisk Insurance Services**

800-334-7950

800 S. Figueroa St #790

Los Angeles, CA 90017

T. (213) 629-9777 F: (213) 629-9779

## "Only for Mexican Plated Vehicles entering the US"

* NAME	INSURED INFO	RMATION	
* ADDRESS			
* CITY		* STATE	* ZIP CODE
EMAIL		* TEL	* FAX
INSURANCE COMPANY IN MEXIC	CO	INSURED ADDR	ESS IN MEXICO
[	DRIVER(S)INFO	RMATION	
* NAME_		* DOB	* LICENSE #
NAME 2		DOB	LICENSE #
VEHICLE INFORMATION			
* YEAR	то	- TRAILER -	- TOWED VEHICLE -
* MAKE			
* MODEL			
*VIN NUM			
PORT OF ENTRY		MITS (Option I only ap Per Person/Occ) \$15,000 / \$30	
CALIFORNIA		Per Person/Occ) \$20,000 / \$40	
○ TEXAS		Per Person/Occ) \$50,000 / \$10	
ARIZONA		Per Person/Occ) \$100,000 / \$2	
O NEW MEXICO		Per Person/Occ) \$100,000 / \$2	
DAYMENT INCODUATION	ΔΙΙΙ	imits include Medical Ex	
PAYMENT INFORMATION	N	person \$10,000 per	accident)
CC NO. VISA MC	AMEX DISCOVER	TRIP DATES	
		Starting Date:	_
EXP DATE Month:	Year:	Ending Deter	(MM/DD/YY)
( MM )	(YYYY)	Ending Date:	(MM/DD/YY)
SIGNATURE		QUOTE	
I Authorize MacAfee and Edward credit card the amount of the insur		TOTAL PREMIUM:	
on this quote.		NO. DAYS:	<u> </u>

# PLEASE TAKE INTO CONSIDERATION THE FOLLOWING INFORMATION WHEN FILLING OUT THIS APPLICATION:

- 1) Policy Fee: Once policy has been issued policy fee is non-refundable.
- **2) Cancellation:** Policies for less than 5 days are non-refundable and fully earned. Longer term policies are subject to a short rate cancellation form.

www.macafeeandedwards.com email: info@mexicard.com

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