

Maine Municipal Association Risk Management Services Property & Casualty Pool

*Email completed form to: rmsunderwriting@memun.org* 

Member:		
Contact:		
Effective Date:		

		Add	Delete	Change									
#1		Year	Make			Model	Vin #/Serial #		Cost New Road		nd Registered		
LUE										\$	Yes	No	
IPMEN		Home/Garaged Location (Street Address):								Department:			
0 0	,	Financed through Lender? Yes No I			If yes, who is the Lender?	? (Provide a copy of the agreement)					nt)		
Ш		Comments:											

	Add	Delete	Change								
QUIPMENT #2	Year	Make			Model	Vin #/Serial #		Cost New	Road Registered		
								\$	Yes	No	
	Home/Garaged Location (Street Address):										
	Financed through Lender? Yes No			No	If yes, who is the Lender?				(Provide a copy of	f the agreemer	nt)
E	Comments:										

	Add	Delete	Change							
#3	Year	Make			Model	Vin # / Serial #		Cost New	Road Registered	
QUIPMENT							\$	Yes No		
	Home/Garag	ed Location (Stre	Department:	:						
	Financed through Lender? Yes No			No	If yes, who is the Lender?			(Provide a copy of the agreement)		
Ē	Comments:									