Since 1828

Vermont Mutual Insurance Company

REASON FOR EXEMPT / WAIVER OF PRE-INSURANCE INSPECTION

AGENCY:

INSUREDS NAME:_____

POLICY NUMBER:_____

VEHICLE DESCRIPTION: _____ _____ _____
Year Make Model

REASON FOR EXEMPTION

1. _____ A new vehicle from a franchised automobile dealership.

   _____ copy of Bill-of-Sale attached; OR

   _____ copy of RMV-1 and window sticker or dealer invoice attached.

2. _____ Applicant has been with VERMONT MUTUAL for more than three years without interruption, under a motor vehicle policy which provides physical damage coverage.

3. _____ Vehicle is a temporary substitute motor vehicle.

4. _____ The vehicle is leased less than six months (Copy of lease is attached).

5. _____ Inspection would cause serious hardship.

   describe hardship:_____

   _____

   _____

6. _____ There is no inspection facility within the town of principal garaging or within five(5) miles of said town.

REASON FOR WAIVER

1. _____ Vehicle is more than ten years old.

2. _____ Vehicle is a non-owned vehicle insured under a VERMONT MUTUAL policy, providing physical damage coverage, which has been inspected.

3. _____ The vehicle is insured under a commercially-rated policy which insures a fleet of five or more motor vehicles owned by the same person or legal entity.

4. _____ The insured is being transferred as part of the _____book transfer to VM.
   name of former company

5. _____ This is a transfer within the agency from _____.
   name of former company

   _____ a copy of the prior carriers inspection is attached.

6. _____ The motor vehicle is insured for physical damage on an expiring Massachusetts Automobile Policy, or a copy of a prior pre-insurance inspection is provided.

7. _____ The applicant has been a customer of the producer for at least three years under a Massachusetts Automobile Policy which included physical damage coverage.

8. _____ The applicant or rated operator has a merit rating of 99, 98 or 0 through 15.

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