

# Washington State Coverage Information

State Minimum

	B I L - \$ 25,000 / 50,000
P D L - \$ 10,000	

Most Common Policy Limits

PIP - \$ 10,000	
UM/UIM- \$ 100,000 / 300,000	B I L - \$ 100,000 / 300,000
Coll - \$ 500 deduct (if included)	P D L - \$ 100,000
Comp - \$ 500 deduct (if included)	

Common Upgrades

PIP - \$ 25,000	
UM/UIM - \$ 250,000 / 500,000	B I L - \$ 250,000 / 500,000
Coll - \$ 500 deduct	P D L - \$ 100,000
Comp - \$ 500 deduct	

Industry Recommended Amounts

PIP - \$ 10,000	
\$ 100,000 / 300,000	\$ 100,000 / 300,000
Coll - \$ 500 deduct	\$ 50,000
Comp - \$ 500 deduct	

Desired Amount of Coverage

_____	_____
_____	_____
_____	_____
_____	_____

Desired Price

\$ \_\_\_\_\_

# Offer Comparison Sheet 1

Offer 1

\_\_\_\_\_ \$ \_\_\_\_\_  
(Company Name) (Final Price)

Offer 2

\_\_\_\_\_ \$ \_\_\_\_\_  
(Company Name) (Final Price)

Offer 3

\_\_\_\_\_ \$ \_\_\_\_\_  
(Company Name) (Final Price)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Deductible amount: \$ \_\_\_\_\_

Roadside Assistance \$ \_\_\_\_\_

Rental Reimbursement \$ \_\_\_\_\_

New Car Replacement \$ \_\_\_\_\_

GAP Insurance \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_



\_\_\_\_\_  
\_\_\_\_\_

Deductible amount: \$ \_\_\_\_\_

Roadside Assistance \$ \_\_\_\_\_

Rental Reimbursement \$ \_\_\_\_\_

New Car Replacement \$ \_\_\_\_\_

GAP Insurance \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_



\_\_\_\_\_  
\_\_\_\_\_

Deductible amount: \$ \_\_\_\_\_

Roadside Assistance \$ \_\_\_\_\_

Rental Reimbursement \$ \_\_\_\_\_

New Car Replacement \$ \_\_\_\_\_

GAP Insurance \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_



\_\_\_\_\_  
\_\_\_\_\_

## Offer Comparison Sheet 2

Offer 4

\_\_\_\_\_ \$ \_\_\_\_\_  
(Company Name) (Final Price)

_____ _____ _____	_____ _____ _____
_____ _____ _____	_____ _____ _____

Deductible amount: \$ \_\_\_\_\_

Roadside Assistance \$ \_\_\_\_\_

Rental Reimbursement \$ \_\_\_\_\_

New Car Replacement \$ \_\_\_\_\_

GAP Insurance \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_



\_\_\_\_\_  
\_\_\_\_\_

Offer 5

\_\_\_\_\_ \$ \_\_\_\_\_  
(Company Name) (Final Price)

_____ _____ _____	_____ _____ _____
_____ _____ _____	_____ _____ _____

Deductible amount: \$ \_\_\_\_\_

Roadside Assistance \$ \_\_\_\_\_

Rental Reimbursement \$ \_\_\_\_\_

New Car Replacement \$ \_\_\_\_\_

GAP Insurance \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_



\_\_\_\_\_  
\_\_\_\_\_

Offer 6

\_\_\_\_\_ \$ \_\_\_\_\_  
(Company Name) (Final Price)

_____ _____ _____	_____ _____ _____
_____ _____ _____	_____ _____ _____

Deductible amount: \$ \_\_\_\_\_

Roadside Assistance \$ \_\_\_\_\_

Rental Reimbursement \$ \_\_\_\_\_

New Car Replacement \$ \_\_\_\_\_

GAP Insurance \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_



\_\_\_\_\_  
\_\_\_\_\_