

Off-Road Vehicle Information

Texas Christian University

In an effort to ensure that all golf carts, Diahatsus and yard trucks ~ owned and leased ~ are insured, provide the following information:

Make: _____

Model: _____

Serial or VIN Number: _____

Replacement Cost: _____

Owned (✓) _____

Leased (✓) _____

If leased, please give the name and address of the leasing company.

Leasing

Company: _____

Leasing Company

Address: _____

Return this information to:

Risk Management Offices

Attn: Paul Fox

P.O. Box 297110

Secret-Wible Building

Room. 115

817.257.7778 (w)

817.257.6677(f)