



**Massachusetts Private Passenger Auto Mobile
Waiver/Exemption – Vehicle Pre-Inspection**

REQUESTOR INFORMATION

Name of Insured			Policy/Binder/Application Number	
Address of Insured		Town	State	Zip Code
Agent's Name			Producer Code	
Year	Make	Model	VIN	

Exemption

- *1. ☐ New, unused vehicle from franchised dealership and complete copy of bill of sale or RMV-1 and window sticker/dealer invoice is attached.
- 2. ☐ Applicant has been insured with Encompass for three years without interruption and has physical damage coverage under policy number: _____
- 3. ☐ Motor vehicle is temporary substitute.
- *4. ☐ Vehicle is leased for less than six months and copy of lease or rental agreement describing the vehicle and its condition ion attached.
- 5. ☐ Completion of pre-inspection would cause a serious hardship. Specify why in comments section below.
- 6. ☐ No inspection facility within five miles of city or town if principal garaging.

Waiver

- 7. ☐ Non-owned motor vehicle insured by another company for physical damage, which has been inspected by that company.
- 8. ☐ Commercial rated fleet vehicle.
- 9. ☐ Qualifies as a book transfer. From _____ company.
- 10. ☐ This is a transfer within the agency from _____. A copy of the prior carrier's inspection is attached.

Other

- 11. ☐ Vehicle over 8,000 pounds.

Comments:

Agency Representative

Date

***Important: Items 4 and 10 require additional documentation to be attached to the new business application or change request. An inspections must be completed if this documentation is not enclosed.**