

# Trailer Rental Liability Form

Date: \_\_\_\_\_

Renter's Name: \_\_\_\_\_

Renter's Insurance Company: \_\_\_\_\_

Renter's Policy Number: \_\_\_\_\_

Limits of Liability: \_\_\_\_\_

## Trailer Information

Rental Company: RV PHOENIX, LLC

Fax Number: 480-376-0457

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

VIN: \_\_\_\_\_

**\*Above mentioned policy extends liability coverage for a non-owned, rented trailer while connected to the insured vehicle.\***

\_\_\_\_\_  
Agent Name

\_\_\_\_\_  
Agent Signature

\_\_\_\_\_  
Date

*Please Fax Completed for to (480) 376-0457*