



## **Supplemental Application for Automobile**

		Insurance Producer:		
		US DOT #:		
1.	Describe how the following types of vehicles Also identify radius of operation.	are used in your business?	ı	
	•	Est. Annu	ıal Mileage	per vehicle
	Private Passenger			
	Passenger vans			
	Light Trucks			
	Medium Trucks			
	Heavy/Extra Heavy Trucks			
	Tractors/Trailers			
	Are any of the trucks used for snow plowing	roads or parking lots?	yes	no
	If yes, provide details.			
2.	Approximately what percentage of the time of miles per trip (one way)?% In excess			
3.	How many power vehicles (exclude trailers),	were in your fleet in the pas	t?	
	# of autos one year ago	# of autos two years ago		
	# of autos three years ago	# of autos four years ago		
4.	Identify which of the following driver hiring c	riteria you have in place:		
	a. MVRs checked prior to hire?	yes	no	
	At least annually thereafter?	yes	no	
	b. Physical exams at time of hire?	yes	no	
	c. Drug / Alcohol testing at time of hire?	yes	no	
	d. Reference checks?	yes	no	
	e. Require CDL when applicable?	yes	no	N/A
	f. Road Test given prior to hire?	yes	no	
	g. Orientation in vehicle with experienced driver	? yes	no	
	If yes, for what period of time?			

n.	Number of drivers under age 25		
	Total # of company drivers: Total # of employed	es:	_
	# of company drivers employed less than one year?		
i.	Minimum # of years of driving experience required on like equipm		
j.	How long have all of these procedures been in place?		
De	escribe your standards for an acceptable MVR below or attach	n copy of cr	iteria:
ls	your MVR Criteria above <u>in writing</u> and always followed?	yes	no
lf (	exceptions are ever made, please describe:		
Aı	ny other actions taken with regards to driver hiring, selection,	_	
ls	there a formal accident review program in place?	yes	no
lf <u>y</u>	yes, please describe:		
Н	ow long has this program been in place?		
ls	there a progressive discipline policy for drivers involved in secidents / violations, etc?	erious or m yes	-
ls ac	there a progressive discipline policy for drivers involved in s	yes	n
Is ac	there a progressive discipline policy for drivers involved in socidents / violations, etc?	yes	n
Is ac If	there a progressive discipline policy for drivers involved in socidents / violations, etc?  yes, please describe	yes	n
Is according to the second sec	there a progressive discipline policy for drivers involved in seccidents / violations, etc?  yes, please describe  ow long has this policy been in place?	yes	no
Is according to the second sec	there a progressive discipline policy for drivers involved in socidents / violations, etc?  yes, please describe  ow long has this policy been in place?  o you provide safety incentive awards?  yes, please describe:	yes	no
Is according to the second sec	there a progressive discipline policy for drivers involved in socidents / violations, etc?  yes, please describe  ow long has this policy been in place?  o you provide safety incentive awards?  yes, please describe:	yes	nc of yo
Is according to the control of the c	there a progressive discipline policy for drivers involved in socidents / violations, etc?  yes, please describe  ow long has this policy been in place?  o you provide safety incentive awards?  yes, please describe:  ow long has this program been in place?  o you have a company policy regarding non-business use (pe	yes yes ersonal use) yes	no no no
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Is action of the second of the	there a progressive discipline policy for drivers involved in secidents / violations, etc?  yes, please describe  ow long has this policy been in place?  o you provide safety incentive awards?  yes, please describe:  ow long has this program been in place?  oyou have a company policy regarding non-business use (per per pany autos by employees or executives?  yes, please describe	yes yes  ersonal use) yes	no no

9.	As part of your personal use policy, do you allow employees or executives insured vehicles for non-business (personal) use?	to use o	no		
	If no, skip to question 10.				
	Is personal use restricted to certain employee types (e.g., management only)?	yes	no		
	If yes, describe:				
	Do you allow the authorized users' spouse to use the company vehicle?	yes	no		
	Do you allow the authorized users' children to use the company vehicle?	yes	no		
	Are there any family members under age 21 given permissive use?	yes	no		
	On a separate page, please provide the name, date of birth and driver lic	ense nu	mber of any		
	spouse or children of employees who are permitted to drive a company v	ehicle.			
10.	Do any of your employees use their own vehicles in the course of employm more?		ce a week o		
	If yes:	yes	110		
	How many employees do this on a regular basis?				
	Do you check their MVRs and use the MVR criteria mentioned above?	yes	no		
	Do you require certificates of insurance to make sure employees are carrying per including bodily injury liability coverage?	sonal au yes	uto coverage no		
	If yes, how often do you request certificates?				
	Do you require the employee to carry a minimum limit of liability?	yes	no		
	If yes, what minimum limit is required? \$				
	Do you make sure any 'business use' exclusion on their policy is deleted?	yes	no		
11.	Do you rent or lease vehicles for your use on a short term basis (daily/weekly/monthly)?				
	If yes, please describe this exposure and the length of the rentals/leases:	yes	no		
	How many times per year is this done?				
	What type of vehicles do you rent or lease?				
	Do you ever rent or lease vehicles WITH drivers?	yes	no		
	If yes, how often and what are the vehicles used for?		_		
	Estimated annual cost of hire?		_		
12.	Do you lease drivers from others?	yes	no		
	If yes, how many drive your company owned (or long term leased) vehicles?				
	Does your MVR criteria apply to these drivers?	yes	no		

	Other controls you exercise over these drivers?		
13.	Do you use owner operators to haul on your behalf?	yes	no
14.	Are your vehicles on a preventive maintenance program?	yes	no
	Are pre/post trip inspections conducted on the heavy units?	yes	no
	Are any vehicles equipped with GPS or similar systems?	yes	no
	Are any vehicles equipped with speed governors?	yes	no
	If yes, maximum speed?	·	
15.	Do you have any restrictions on the use of cell phones while operating vehicles (hands-free device only, must pull off to side of road, etc)?	<b>company</b> yes	no
	If yes, please describe:		
Thank	ss for your cooperation in completing this supplement to assist us in underwritin	g your acc	ount.
COMF OF CL PURP COMM PERSO	PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURA PANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR SLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEAU OSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL MITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS ON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable H, OK, OR, or VT; In DC, LA, ME, TN, VA and WA, insurance benefits may also be considered as a supplemental of the contained benefits and the contained benefits may also be contained benefits.)	STATEMEN LS FOR TH THERETO S THE le in CO, HI	E ,
	d Name of Person Completing this Application:		
Fitle o	of Parson complating this application:		

Date:

Signature:

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