|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Requested Effective Date: | | Agent: | | Agency: | | |
| Agent email: | | | | Agent Phone #: | | |
| Insured Name including DBA: | | | | MC Number: | | US DOT Number: |
| Type of Business:  **Individual  Corporation  LLC  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | Yrs in Trucking Ind. |
| **Are Filings Required: Yes  No** | | | | |  | FEIN# |
| Location | Address | | City | | State | Zip Code: |
| Mailing |  | |  | |  |  |
| **Garaging** |  | |  | |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Description of Operations:** | | For Hire  Private  Non Trucking  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Maximum Radius: | | Range of Transport:  Interstate  Intrastate | | | | | |
| What percentage of loads are:  0-100 miles: %101-300 miles:  %  301-500 miles: % 501+ miles:  % | | | | Please list major Metropolitan Areas traveled through or into: | | | |
|  | | | | | | | |
|  | | | | | | | |
| **Operation History** | |  | |  | |  | |
|  | Projected | | Past Year | | Past Year 2 | | Past Year 3 |
| Revenue |  | |  | |  | |  |
| Mileage |  | |  | |  | |  |
| # Units Operated |  | |  | |  | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Motor Truck Cargo** | Requested Limit: | | Deductible: | |
| Commodity | % of Loads | Maximum Value | Average Value | Comments:  If Autos % New/%Used |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Optional Coverages:**  Earned Freight  Refrigeration Breakdown | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Driver Information | | Must be completed on all drivers. (Include owner) | | | |
| Driver Name | | Date of Birth | License Number | State | #Yrs Driving Similar Equip |
| 1 | **Owner**: |  |  |  |  |
|  | **Owner SSN:** |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Driver Information Continued (last 3 years) | | | | |
|  | Date of Hire | #Violations | # Accidents | Details (Accidents are considered at fault unless report showing not at fault is submitted) |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Insurance History and Loss Experience** | | | | | **Years Prior Insurance Under Business Name**: | | | | |
| Has any insurance company canceled or nonrenewed your policy in the last 3 years?  Yes  No If yes, please explain in Comments section below. | | | | | Type:  P = Physical Damage C = Cargo  L = Primary Liability N = Non Truck Liab | | | | |
| From | To | Ins. Co | Type | Pol # | # Units Insured | Any Losses | # Losses | Amount | Driver Involved |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Schedule of Autos to be Insured | | | All units you own or are leased to you must be scheduled and insured if filings are to be made. | | | | | |
| Type: TR = Tractor TK = Truck  TL = Trailer V = Van | | | Trailers: D = Dump F = Flat Bed R = Reefer CC = Car Carrier  DV = Dry Van T = Tanker | | | | | |
| Model YR | Trade Name | Type | Trailer Type | Vin | GVW/GCQW | Stated Value | Max Radius | Owner’s Name |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Coverages and Limits | Auto Liability: CSL $ | |
| Med Pay: $ | UM/UIM Limits: $ | Non-Owned Auto: # of Employees: |
| Physical Damage Deductible:  $ | PIP Coverage Limit: $ | Hired Auto Cost of Hire:  If Any Basis |
| Motor Truck Cargo $  Deductible $ | General LiabilityTrailer Interchange:  # Executive officers | |

|  |
| --- |
| Comments:  Phone:  Employees: / Payroll: / Gross Sales: / FEIN #: / W.C. Carrier: |