AGENCY CUSTOMER ID:

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ACORD °	

IOWA COMMERCIAL AUTO

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DATE	(MM/DD/YYYY)	

MAND INSURED NOT MAND MA									
BUSINESS AUTO SECTION A A B B B A B B B A B B									
COVERAGES COVE									
COVERAGES COVE									
LIABILITY									
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MEDICAL MEDI									
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MEDICAL PAYMENTS									
STACKED NON-STKD									
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UNDERINS MOT									
STACKED 3 3 4 0 7 BI EACH ACCIDENT \$									
HIRED / BORROWED LIABILITY YES STATES COST OF HIRE IF ANY BASIS NO SPEC COMP S SPEC COFF S NO EMPLOYEES NO PARTNERS (4) OWNED AUTOS OTHER THAN PRIVATE PASSENGER AUTOS ONLY SYMBOLS (3) OWNED PRIVATE PASSENGER AUTOS ONLY (6) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORISTS LAW STATES # DAYS # VEH COVERAGE / DEDUCTION HIRED / BORY PASSENGER / DAYS PASSENGER / DEDUCTION									
NON-OWNED LIABILITY YES STATES GROUP TYPE NUMBER OF PHYSICAL DAMAGE NO EMPLOYEES DAMAGE VOLUNTEERS NO PARTNERS (4) OWNED AUTOS OTHER THAN PRIVATE PASSENGER AUTOS ONLY (5) OWNED AUTOS SUBJECT TO NO-FAULT (5) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORISTS LAW (9) NON-OWNED AUTOS ONLY (9) NON-OWNED AUTOS ONLY (9) NON-OWNED AUTOS ONLY									
COVERED AUTO (2) OWNED AUTOS ONLY (4) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORISTS LAW (9) NON-OWNED AUTOS ONLY									
COVERED (1) ANY AUTO (4) OWNED AUTOS OTHER THAN PRIVATE PASSENGER AUTOS ONLY (7) SPECIFICALLY DESCRIBED AT AUTO (2) OWNED AUTOS ONLY (5) OWNED AUTOS SUBJECT TO NO-FAULT (8) HIRED AUTOS ONLY (9) NON-OWNED AUTOS ONLY									
AUTO (2) OWNED AUTOS ONLY (5) OWNED AUTOS SUBJECT TO NO-FAULT (8) HIRED AUTOS ONLY SYMBOLS (3) OWNED PRIVATE PASSENGER AUTOS ONLY (6) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORISTS LAW (9) NON-OWNED AUTOS ONLY									
SIGNATURE LUNDED STAND AND ACKNOWLEDGE THAT LUAVE DEEN OFFEDED THE FOLLOWING UNINCHDED (UM) AND LINDED INCLIDED (UM) MOTODIST ODTIONS:									
I UNDERSTAND AND ACKNOWLEDGE THAT I HAVE BEEN OFFERED THE FOLLOWING UNINSURED (UM) AND UNDERINSURED (UIM) MOTORIST OPTIONS: 1) STACKED UM AND UIM COVERAGE 2) NON-STACKED UM AND UIM COVERAGE 3) LIMITS EQUAL TO MY BODILY INJURY (BI) LIMITS I HAVE ELECTED TO PURCHASE THE COVERAGE AND LIMITS SHOWN ON THE DECLARATIONS PAGE. IF I HAVE REJECTED UM OR UIM, OR SELECTED OPTION									
1, THEN I AND ALL OTHER NAMED INSUREDS ON MY POLICY, HAVE ALSO SIGNED THE IOWA AUTO SUPPLEMENT. I UNDERSTAND THAT THE COVERAGE SELECTION AND LIMIT CHOICES INDICATED HERE WILL APPLY TO ALL FUTURE POLICY REN CONTINUATIONS									
APPLICANT'S SIGNATURE DATE PRODUCER'S SIGNATURE NATIONAL PRODUCE									

ACORD 137 IA (2015/12)

AGEN	\sim	\sim 11	CTC	ID.

TRUCKERS SEC	CTION																
COVERAGES	COVER	ED AUT	SYMBOLS		LIMIT	rs							/SICAI	L DAMAG	E		
	41		47	CSL	BI EA PER \$	3		COVERAG	GES	A	COVE UTO SY	RED MBOI	Ls		LIMITS		DEDUCTIBLE
LIABULTY.	42		50	BI EACH ACCII	_	3					42		47				
LIABILITY	43		1	PROPERTY DA	MAGE \$	3		COMP / OTC	;		43						\$
	46		_								46		'				
	1.0										42		47	SCL	FT	LSP	
								SPECIFIED			1		47	F			
								CAUSES OF	LOSS		43		'	F	FTW	'	\$
											46	T					
			1								42		47				•
MEDICAL PAYMENTS	42		46	EACH PERSON	۱	3		COLLISION			43						\$
FATMENTS	43									_	46						
UNINSURED MOT	42		46	CSL	BI EA PER \$	3		TOWING			46			\$			
STACKED	43			BI EACH ACCII	DENT \$	3		& LABOR									
NON-STKD	45													TERCHAN			
UNDERINS MOT	42		46	CSL	BI EA PER \$	3		COVERAG	GES	SY	MBOL	# TR	AILER	s FARTH ZONE	# DAYS	RADIUS	DEDUCTIBLE
STACKED	43			BI EACH ACCII	DENT \$	5		COMP / OTC			48						
NON-STKD	45							COMI / OTC	,		49						
NON-TRUCKERS	YE	S	STATES	COST OF HIRE		IF ANY BA	SIS	SPECIFIED			48						
HIRED / BORROWED	NC)		\$		-		CAUSES OF	LOSS		49						
TRUCKERS	YE	S	STATES	COST OF HIRE		IF ANY BA	SIS				48						
HIRED / BORROWED LIABILITY	NC)		\$		_		COLLISION			49						\$
	YE	S	STATES	GROUP TYPE		NUI	MBER OF	TRAILER VA	LUE	\$							
NON-OWNED	l NC)		EMPLOYE	FS	110.			STA	ATES	# C	AYS	#	VEH			
AUTO				VOLUNTE				1									
LIABILITY				PARTNER				HIRED									
OTHER				PARTNER	(5			PHYSICAL									
								DAMAGE									
														T 1_			
								OTHER		T 00	VERAG	E IS:		P	RIMARY		ECONDARY
								OTTLER									
(41) ANY AUTO	BOLS) OWNED AUTOS) OWNED AUTOS				DIFICALLY DES DIAUTOS ONL		D AUT	ros						SESSION OF A TRAILER
(42) OWNED AUTOS O			,	COMPULSORY	UNINSURED	, ,	(48) TRAII	LERS IN YOUR	POSSE				- 1	INTERCH	ANGE AGI	REEMENT	ATTAILLI
(43) OWNED COMMER				MOTORIST LAV				AILER INTERC					()		NED AUTO	S ONLY	
ENDORSEMENT	S/RE	MARK	S (ACOR	RD 101, Addi	tional Ren	narks Sc	hedule, ma	y be attac	hed if	mo	re sp	ace	is re	quired)		
SIGNATURE																	
I UNDERSTAND A	ND ACK	NOWL	EDGE THA	AT I HAVE BEE	N OFFERED	THE FOL	LOWING UN	IINSURED (L	JM) AN	ID U	NDER	INSU	RED	(UIM) M	OTORIS	T OPTIO	NS:
1) STACKED UM A																	
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1, THEN I AND ALL OTHER NAMED INSUREDS ON MY POLICY, HAVE ALSO SIGNED THE IOWA AUTO SUPPLEMENT.																	
I UNDERSTAND								CATED HER	RE W	ILL	APPL	Y TO	AL C	L FUT	URE P	OLICY F	RENEWALS,
CONTINUATIONS		ANGES	S UNLESS	I NOTIFY YOU	1	SE IN WRI											
APPLICANT'S SIGNATI	JRE				DATE		PRODUCER'S	SIGNATURE							NATIO	NAL PROD	UCER NUMBER
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MOTOR CARRIER SECTION																			
COVERAGES	со	VERE	ED A	UTO SYMBOLS	SYMBOLS LIMITS PHYSICAL DAMAGE														
		61		67		CSL	BI EA PER	\$		COVERA	GES	Δ.	COVI UTO S	ERED	ıs		LIMITS		DEDUCTIBLE
		62		68	BLE	ACH ACCIDI		\$				<u> </u>	62		67				
LIABILITY		1								COMP / OTC	•				1				
		63		71	PRO	OPERTY DAM	AGE	\$		John 7010	,		63		68				\$
		64											64	+					
										ODEOLEIED			62		67	SCL	FT FT	LSP	
										SPECIFIED CAUSES OF	LOSS		63		68	F	FT\	N	\$
										07.0020 01	2000		64						
													62		67				
										COLLISION			63		68				\$
										COLLIGIOIT					"				
			_										64	+					
MEDICAL		62		64	EAC	CH PERSON		\$		TOWING			63		_	\$			
PAYMENTS		63		67						& LABOR			67						
UNINSURED MOT		62		66		CSL	BI EA PER	\$								TERCHAI			
STACKED		63		67	BIE	ACH ACCIDI	ENT	\$		COVERA	GES	SY	MBOL	# TR	AILER	S FARTH	# DAYS	RADIUS	DEDUCTIBLE
NON-STKD		64								00110 / 070			69						
UNDERINS MOT		62		66		CSL	BI EA PER	\$		COMP / OTC	,		70						
STACKED		63		67	DI F	ACH ACCIDI	_	\$					69	+					
		1		- 67	BIE	ACH ACCIDI	=IN I	Ф		SPECIFIED CAUSES OF	2201								
NON-STKD		64	\perp	074750	-					0/10020 01		-	70	+-					
NON-TRUCKERS HIRED / BORROWED	_	YES		STATES	COS	ST OF HIRE		IF ANY BA	ASIS	COLLISION			69						\$
		NO			\$							<u> </u>	70						·
TRUCKERS HIRED / BORROWED		YES	S	STATES	cos	ST OF HIRE		IF ANY B	ASIS	TRAILER VA	LUE	\$							
LIABILITY		NO			\$						ATES	# [DAYS	#	VEH				
		YES STATES		GRO	OUP TYPE		NU	MBER OF											
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AUTO						EMPLOYEES				PHYSICAL									
LIABILITY						VOLUNTEERS				DAMAGE									
						PARTNERS	8												
OTHER												CO	VERAC	SE IS:		F	PRIMARY		SECONDARY
								OTHER											
COVERED AUTO SYME	BOLS			(64	1) OWN	NED COMME	RCIAL AUT	TOS ONLY	(67) SPE(CIFICALLY DES	CRIBEI	D AUT	os		(70)	YOUR TR	All FRS IN	THE POS	SESSION OF
(61) ANY AUTO				(68	1WO (NED AUTOS	SUBJECT :	TO NO-FAULT	Γ (68) HIRE	D AUTOS ONL	Υ.				` '	ANOTHE	R TRUCKE	R UNDER	A TRAILER
(62) OWNED AUTOS O (63) OWNED PRIVATE		S AUT	เดร			NED AUTOS LY UNINSURI		TO A COMPU		LERS IN YOUR AILER INTERC							IANGE AG NED AUT(REEMENT OS ONLY	
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ENDORSEMENT	31	KEI	VIA	KKS (ACUI	ו עו	Ji, Additi	onai Ke	illarks 50	nedule, ma	y be allac	nea n	mo	re sp	ace	is re	quirea)		
SIGNATURE																			
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APPLICANT'S SIGNATI	JRE						DATE		PRODUCER'S	SIGNATURE							NATIO	NAL PROD	UCER NUMBER