

NEW VENTURE SUPPLEMENTAL – Trucker

(In business less than 3 years)

Name of Applicant: _____ DOT# (If applicable) _____

All Commodities hauled with % of each: _____

Garaging Location: _____ Areas of operations: _____

% of NAFTA related operations _____ % of Domestic Rated Ops _____

1) What is the insured's (all owners') background experience running a trucking company?

(If owned & operated another company in the past – give name, dates & USDOT number; if worked for others, give company name, duties, years worked etc) _____

2) Provide names of business owners, DOB, and attached copies of DLs: _____

3) How many units is insured starting with? _____

Of the # above - how many are owned units: _____ How many are hired Owner/Operators _____

(Please specify on unit list which ones are owned vs owner/operators)

When were the unit(s) acquired? _____ How were they acquired? _____

4) Is the insured expecting to grow in the first year of business? Yes ☐ No ☐ ; If so,

How many additional owned units: _____

How many additional hired owner/operators: _____ Will

insured schedule all owned/leased units? Yes ☐ No ☐

5) Will the insured hire owner operators? Yes ☐ No ☐ ; If so:

Will hired owner/operators be required to carry bobtail (non-trucking liab?) Yes ☐ No ☐

Will hired owner/operators be required to carry their own physical damage when required? Yes ☐ No ☐

If no, and insured will be covering owner/operator physical damage – advise how insured checks for prior losses or damage: _____

Will hired o/o's have same maintenance requirements as insured's owned units? Will Yes ☐ No ☐

insured hire owner/operators or others that won't be scheduled? Yes ☐ No ☐

6) Will insured hire drivers with less than 2 years CDL exp? Yes ☐ No ☐ ; Or less than 2 years Hazmat experience (if hauling hazmat) Yes ☐ No ☐

7) Will insured hire drivers under age 25? Yes ☐ No ☐ Or over 68? Yes ☐ No ☐

8) If insured already has or intends on growing more than 4 total units in the 1st or 2nd year in business – advise:

A. Hiring practices and who manages it? _____

B. Maintenance procedures and who manages it? _____

C. Safety procedures and who manages it? _____

9) What is the estimated annual mileage per power unit (the actual number of miles one power unit will put on the odometer in a year on average)? _____ each; AND what are furthest cities entered from garaging? _____

10) What are largest cities entered & % of time? _____%; _____%; _____%; AND what states will insured operate into? _____

11) Will insured own any units that are insured elsewhere? Yes ☐ No ☐ If yes, explain: _____

12) Are you required to carry hired/non-owned coverages? Yes ☐ No ☐

If so, what is estimated annual cost of hire? _____

How many employees use their own vehicles for company business? _____ and in what capacity and how often? _____