



Transportation Supplement Questions

1. Information about employees:

of drivers:

of owner operators:

of mechanics:

of clerical staff:

Minimum driver age:

Minimum driver experience:

Driver turnover %:

2. Driver selection procedures:

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3. Have any drivers been convicted of negligent homicide, unlawful use of vehicle, speed contest or racing, reckless driving, leaving the scene of an accident or a hit and run, felony conviction which involves a motor vehicle, speed twenty miles or more over the speed limit, driving while license is suspended or revoked in a commercial vehicle, DUI or DWI?

If yes, please provided drivers name, conviction date and details:

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4. Any drivers with 4 or more moving violations and/or at fault accidents in the past 3 years?

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5. How are drivers compensated?

-
6. Vehicle operations monitoring:

If other, please provided details:

Applicant

Signature

Date



Transportation Supplement Questions (Continued)

7. Operational Territory Percentage:

Rural:

Suburban:

Metropolitan/urban:

8. Radius of operations:

9. Number of power units (including lease to and from others):

Conventional:

Straight trucks:

Dump trucks:

Cabovers:

Wreckers:

Other:

If other, please provided details:

10. Number of trailers:

Van/dry box:

Intermodal containers:

Flatbed:

Reefer:

Dry bulk:

Liquid tanker:

Hopper bottom:

Logging:

Livestock:

Compressed gas:

Doubles/triples:

Dump:

Open top van:

Auto transporter:

Other:

If other, please provided details:

Applicant

Signature

Date



Transportation Supplement Questions (Continued)

11. List commodities hauled and total percent of freight:

12. Any hazardous materials hauled?

If yes, please list materials:

13. Does the insured own any other business?

14. Are all owned and operated power units listed on this application?

15. Any use of sub-haulers or owner/operators?

If yes, do you use a written subcontractor agreement containing hold harmless/indemnity agreement?

16. Do you allow family members or guest passengers to "ride along"?

17. Do you have a formal safety program?

18. Do you lend, lease or rent trucks or equipment to others without drivers/operators?

19. Do you comply with all DOT/FMCSA regulations concerning driver employment, file and regulations?

20. Have you or any business you've owned ever filed bankruptcy?

21. Do employees perform roadside repair/service?

Applicant

Signature

Date



Transportation Supplement Questions (Continued)

22. Any manual loading or unloading?

23. US DOT #:

24. ICC #:

25. MC/MX #:

Applicant

Signature

Date