

**Garage & Auto Dealer Application is required in addition to this Supplemental.**

**ALL QUESTIONS MUST BE ANSWERED IN FULL, SIGNED AND DATED BY THE APPLICANT.**

Name of Applicant (include DBA): \_\_\_\_\_

<b>INDICATE PERCENTAGE OF THE FOLLOWING TYPE OF AUTO EXPOSURES</b>	
Private Passenger, Light & Medium Truck	_____ %
Cruiser/ Touring Motorcycles (i.e. Choppers, Trikes)	_____ %
Sport/ Speed Motorcycles (i.e. Ninja, Ducati, Buell)	_____ %
Dirt Bike, ATVs, UTVs, Snowmobile (other off-road vehicles)	_____ %
Moped, Goped, Scooter - Licensed for public road use	_____ %
Moped, Goped, Scooter - Not Licensed for public road use	_____ %
Recreational Vehicle / Motor Coaches	_____ %
Watercraft or Boats (other than Jet Skis): Size: _____ feet	_____ %
Jet Skis	_____ %
Bucket Trucks, Cranes, Scissor Lifts	_____ %
Forestry or Logging Equipment	_____ %
Garbage Trucks	_____ %
Farm Tractors, Equipment or Implements	_____ %
Contractors Equipment	_____ %
Heavy Trucks or Tractors (26,001 or more GVW)	_____ %
Semi-Trailers, Livestock Trailer	_____ %
Tanker Truck or Trailers	_____ %
Utility Trailers, Service Trailers, Horse Trailers	_____ %
Busses (over 15 passenger capacity)	_____ %
Shuttle Busses (15 passenger or less capacity)	_____ %
School Busses	_____ %
Emergency Vehicles: (check all that apply) <input type="checkbox"/> Fire Truck <input type="checkbox"/> Ambulance <input type="checkbox"/> Police Car	_____ %
OTHER (Provide complete description): _____	_____ %

**UNDERWRITING INFORMATION**

Provide % exposure in relation to the above specialty vehicles.

\_\_\_\_\_ % Service/ Repair: Brakes

\_\_\_\_\_ % Service/ Repair: Frame or Unibody Straightening

\_\_\_\_\_ % Service/ Repair: Pumps, Valves, Hoses of Tankers or Emergency Vehicles

\_\_\_\_\_ % Service/ Repair: Medical or Lifesaving Equipment

\_\_\_\_\_ % Service/ Repair: Gasoline Tanks    Provide details: \_\_\_\_\_

\_\_\_\_\_ % Service/ Repair: Hydraulic Systems    Provide details: \_\_\_\_\_

\_\_\_\_\_ % Service/ Repair: Refrigeration Systems

\_\_\_\_\_ % Service/ Repair: Structural Welding    Provide details: \_\_\_\_\_

\_\_\_\_\_ % Structurally Alter/ Convert Vehicles    Provide details: \_\_\_\_\_

\_\_\_\_\_ % Manufacture/ Fabricate: Auto Parts    Provide details: \_\_\_\_\_

\_\_\_\_\_ % Custom Auto Assembly: Kit Car / Bike Building    *If yes, provide details below.*

Do you:

Service/ Repair: Watercraft while in the water?	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Service/ Repair: Watercraft hull?	If yes, provide details: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Storage or parking space rental operations?	If yes, provide receipts: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Diversion of traffic required?	If yes, provide details: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any out-of-state pickup or delivery requiring federal filing?	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are autos taken to trade shows or special events?	If yes, how many times per year: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

**ADDITIONAL INFORMATION**

---



---



---

\_\_\_\_\_ **Witness**
\_\_\_\_\_ **Date**
\_\_\_\_\_ **Applicant's Signature**