

# ACORD<sup>TM</sup> BUSINESS AUTO SECTION

DATE (MM/DD/YYYY)

|                     |                          |                                    |                 |                            |              |       |
|---------------------|--------------------------|------------------------------------|-----------------|----------------------------|--------------|-------|
| AGENCY              | PHONE<br>(A/C, No, Ext): | APPLICANT<br>(First Named Insured) |                 |                            |              |       |
|                     | FAX<br>(A/C, No):        |                                    |                 |                            |              |       |
| CODE:               | SUB CODE:                | EFFECTIVE DATE                     | EXPIRATION DATE | DIRECT BILL<br>AGENCY BILL | PAYMENT PLAN | AUDIT |
| AGENCY CUSTOMER ID: |                          | FOR COMPANY USE ONLY               |                 |                            |              |       |

**COVERAGES/LIMITS**

USE ACORD 137 FOR YOUR STATE TO PROVIDE COVERAGES/LIMITS INFORMATION

**DRIVER INFORMATION** ACORD 163 attached for additional drivers

LIST ALL DRIVERS, INCLUDING FAMILY MEMBERS THAT WILL DRIVE COMPANY VEHICLES, AND EMPLOYEES WHO DRIVE OWN VEHICLES ON COMPANY BUSINESS.

| DRIVER # | NAME (Include address, if required) | SEX | MAR STAT | DATE OF BIRTH | YRS EXP | YEAR LIC | DRIVERS LICENSE NUMBER/<br>SOCIAL SECURITY NUMBER | STATE LIC | DATE HIRE | BROADEN NO-FAULT | DOC | USE VEH # | % USE |
|----------|-------------------------------------|-----|----------|---------------|---------|----------|---|-----------|-----------|------------------|-----|-----------|-------|
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |
|          |                                     |     |          |               |         |          |   |           |           |                  |     |           |       |

**GENERAL INFORMATION**

| EXPLAIN ALL "YES" RESPONSES  | YES | NO | EXPLAIN ALL "YES" RESPONSES   | YES                                  | NO |
|--|-----|----|---|--------------------------------------|----|
| 1. WITH THE EXCEPTION OF ENCUMBRANCES, ARE ANY VEHICLES NOT SOLELY OWNED BY AND REGISTERED TO THE APPLICANT? |     |    | 8. ANY HOLD HARMLESS AGREEMENTS?                                    |                                      |    |
| 2. DO OVER 50% OF THE EMPLOYEES USE THEIR AUTOS IN THE BUSINESS?   |     |    | 9. ANY VEHICLES USED BY FAMILY MEMBERS? IF SO, IDENTIFY IN REMARKS. |                                      |    |
| 3. IS THERE A VEHICLE MAINTENANCE PROGRAM IN OPERATION?  |     |    | 10. DOES THE APPLICANT OBTAIN MVR VERIFICATIONS?                    |                                      |    |
| 4. ARE ANY VEHICLES LEASED TO OTHERS?  |     |    | 11. DOES THE APPLICANT HAVE A SPECIFIC DRIVER RECRUITING METHOD?    |                                      |    |
| 5. ARE ANY VEHICLES CUSTOMIZED, ALTERED OR HAVE SPECIAL EQUIPMENT?   |     |    | 12. ARE ANY DRIVERS NOT COVERED BY WORKERS COMPENSATION?            |                                      |    |
| 6. ARE ICC, PUC OR OTHER FILINGS REQUIRED?   |     |    | 13. ANY VEHICLES OWNED BUT NOT SCHEDULED ON THIS APPLICATION?       |                                      |    |
| 7. DO OPERATIONS INVOLVE TRANSPORTING HAZARDOUS MATERIAL?  |     |    | 14. ANY DRIVERS WITH CONVICTIONS FOR MOVING TRAFFIC VIOLATIONS?     |                                      |    |
| DESCRIPTION OF GARAGE/STORAGE LOCATIONS  |     |    |   | 15. HAS AGENT INSPECTED VEHICLES?    |    |
|  |     |    |   | MAXIMUM DOLLAR VALUE SUBJECT TO LOSS |    |
|  |     |    |   | \$                                   |    |

**ADDITIONAL INTEREST/CERTIFICATE RECIPIENT** ACORD 45 attached for additional names

| INTEREST                                    | RANK: | NAME AND ADDRESS | REFERENCE #: | CERTIFICATE REQUIRED | INTEREST IN ITEM NUMBER |
|---|-------|------------------|--------------|----------------------|-------------------------|
| <input type="checkbox"/> ADDITIONAL INSURED |       |                  |              |                      | VEHICLE:                |
| <input type="checkbox"/> LOSS PAYEE         |       |                  |              |                      | SCHEDULED ITEM NUMBER:  |
| <input type="checkbox"/> LIENHOLDER         |       |                  |              |                      | OTHER                   |
| <input type="checkbox"/> EMPLOYEE AS LESSOR |       |                  |              |                      |                         |
| <input type="checkbox"/> OWNER              |       |                  |              |                      |                         |
| <input type="checkbox"/> REGISTRANT         |       |                  |              |                      |                         |
| ITEM DESCRIPTION:                           |       |                  |              |                      |                         |

**REMARKS**

**VEHICLE DESCRIPTION**  ACORD 129 attached for additional vehicles

|                                |          |         |                 |                |                |       |         |            |               |        |               |             |
|--------------------------------|----------|---------|-----------------|----------------|----------------|-------|---------|------------|---------------|--------|---------------|-------------|
| VEH #                          | YEAR     | MAKE:   | BODY TYPE:      | VEHICLE TYPE   |                |       | SYM/AGE | COST NEW   |               |        |               |             |
|                                |          | MODEL:  | V.I.N.:         | PP             | SPEC           | COML  | \$      |            |               |        |               |             |
| CITY, STATE, ZIP WHERE GARAGED |          |         | LIC STATE       | TERR           | GVW/GCW        | CLASS | SIC     | FACTOR     | SEAT CP       | RADIUS | FARTHEST TERM |             |
| DRIVE TO WORK/SCHOOL           | USE      | COMM'L  | CHECK COVERAGES | ADD'L NO-FAULT | UNDRINS MOTOR  | F     | LSP     | RENT REIMB | DEDUCTIBLES   | ACV    | COMP          | SPEC C OF L |
| < 15 MILES                     | PLEASURE | RETAIL  | LIAB            | MED PAY        | TOWING & LABOR | FT    | COMP    | FG         | AA            | ST AMT | \$            |             |
| 15 MILES +                     | FARM     | SERVICE | NO-FAULT        | UNINS MOTOR    | SPEC C OF L    | FTW   | COLL    |            | \$            |        | \$            | COLL        |
| NET VEH DR/CR:                 |          |         |                 |                |                |       |         |            | TOTAL PREM \$ |        |               |             |
| VEH #                          | YEAR     | MAKE:   | BODY TYPE:      | VEHICLE TYPE   |                |       | SYM/AGE | COST NEW   |               |        |               |             |
|                                |          | MODEL:  | V.I.N.:         | PP             | SPEC           | COML  | \$      |            |               |        |               |             |
| CITY, STATE, ZIP WHERE GARAGED |          |         | LIC STATE       | TERR           | GVW/GCW        | CLASS | SIC     | FACTOR     | SEAT CP       | RADIUS | FARTHEST TERM |             |
| DRIVE TO WORK/SCHOOL           | USE      | COMM'L  | CHECK COVERAGES | ADD'L NO-FAULT | UNDRINS MOTOR  | F     | LSP     | RENT REIMB | DEDUCTIBLES   | ACV    | COMP          | SPEC C OF L |
| < 15 MILES                     | PLEASURE | RETAIL  | LIAB            | MED PAY        | TOWING & LABOR | FT    | COMP    | FG         | AA            | ST AMT | \$            |             |
| 15 MILES +                     | FARM     | SERVICE | NO-FAULT        | UNINS MOTOR    | SPEC C OF L    | FTW   | COLL    |            | \$            |        | \$            | COLL        |
| NET VEH DR/CR:                 |          |         |                 |                |                |       |         |            | TOTAL PREM \$ |        |               |             |
| VEH #                          | YEAR     | MAKE:   | BODY TYPE:      | VEHICLE TYPE   |                |       | SYM/AGE | COST NEW   |               |        |               |             |
|                                |          | MODEL:  | V.I.N.:         | PP             | SPEC           | COML  | \$      |            |               |        |               |             |
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| DRIVE TO WORK/SCHOOL           | USE      | COMM'L  | CHECK COVERAGES | ADD'L NO-FAULT | UNDRINS MOTOR  | F     | LSP     | RENT REIMB | DEDUCTIBLES   | ACV    | COMP          | SPEC C OF L |
| < 15 MILES                     | PLEASURE | RETAIL  | LIAB            | MED PAY        | TOWING & LABOR | FT    | COMP    | FG         | AA            | ST AMT | \$            |             |
| 15 MILES +                     | FARM     | SERVICE | NO-FAULT        | UNINS MOTOR    | SPEC C OF L    | FTW   | COLL    |            | \$            |        | \$            | COLL        |
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| VEH #                          | YEAR     | MAKE:   | BODY TYPE:      | VEHICLE TYPE   |                |       | SYM/AGE | COST NEW   |               |        |               |             |
|                                |          | MODEL:  | V.I.N.:         | PP             | SPEC           | COML  | \$      |            |               |        |               |             |
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|                                |          | MODEL:  | V.I.N.:         | PP             | SPEC           | COML  | \$      |            |               |        |               |             |
| CITY, STATE, ZIP WHERE GARAGED |          |         | LIC STATE       | TERR           | GVW/GCW        | CLASS | SIC     | FACTOR     | SEAT CP       | RADIUS | FARTHEST TERM |             |
| DRIVE TO WORK/SCHOOL           | USE      | COMM'L  | CHECK COVERAGES | ADD'L NO-FAULT | UNDRINS MOTOR  | F     | LSP     | RENT REIMB | DEDUCTIBLES   | ACV    | COMP          | SPEC C OF L |
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| 15 MILES +                     | FARM     | SERVICE | NO-FAULT        | UNINS MOTOR    | SPEC C OF L    | FTW   | COLL    |            | \$            |        | \$            | COLL        |
| NET VEH DR/CR:                 |          |         |                 |                |                |       |         |            | TOTAL PREM \$ |        |               |             |
| VEH #                          | YEAR     | MAKE:   | BODY TYPE:      | VEHICLE TYPE   |                |       | SYM/AGE | COST NEW   |               |        |               |             |
|                                |          | MODEL:  | V.I.N.:         | PP             | SPEC           | COML  | \$      |            |               |        |               |             |
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| 15 MILES +                     | FARM     | SERVICE | NO-FAULT        | UNINS MOTOR    | SPEC C OF L    | FTW   | COLL    |            | \$            |        | \$            | COLL        |
| NET VEH DR/CR:                 |          |         |                 |                |                |       |         |            | TOTAL PREM \$ |        |               |             |