



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: (Written application; Written test; MVR review; Physical; Interview; Reference checks; Drug test; Driving test)

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?

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

5. How are drivers compensated?

6. Vehicle operations monitoring: (Recording device; Radio dispatch; Surveillance devices; Anti-theft devices; GPS services; Back-up cameras/alarms; Other)

If other, please provide details:

Applicant / Approver

Signature



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 / Approver

Signature



Transportation Supplement Questions (Continued)

11. List commodities hauled and total percent of freight:

12. Which of the following does the insured haul: (Hazardous materials; Explosive/flammable gasses; Livestock; Oversized loads; Heavy machinery; Logs/timber/woodchips; Chemicals; Liquids; Coal; Motor vehicles)

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

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

If yes, what percentage of insured's total labor exposure is owner operator vs W2 employees?

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

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

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

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

18. Do employees perform roadside repair/service?



Transportation Supplement Questions (Continued)

19. Any manual loading/unloading or manual tarping?

20. US DOT #:

21. ICC #:

22. MC/MX #:

23. Do employees of the insured operate armored vehicles or party buses?

24. Does the insured perform any emergency or non-emergency medical transportation?

25. Do employees of the insured deliver packages for Amazon or similar type company?

26. Does the insured take any overnight trips?

27. Any delivery by bicycle?

28. Is this a moving company?

29. Does the insured operate between 12 a.m. and 6 a.m.?

30. Any towing, auto repossession, or work more than 55 hours a week?

31. Check which apply to the insured's operations: (Has drivers that solely make restaurant deliveries and are employed directly by the restaurant; Transports goods of others or provide transportation services to members of the general public)