

NON-OWNED & HIRED AUTO SUPPLEMENTAL QUESTIONNAIRE

PREPARATION INSTRUCTIONS

- 1) ANSWER ALL QUESTIONS. IF THE ANSWER TO ANY QUESTIONS IS NONE, PLEASE STATE NONE.
- 2) APPLICATION MUST BE SIGNED AND DATED BY OWNER, PARTNER OR OFFICER.
- 3) BROCHURES, COPIES OF GUARANTEES, WARRANTIES AND HOLD HARMLESS AGREEMENTS FURNISHED BY THE NAMED INSUREDS SHOULD ACCOMPANY THE APPLICATION.
- 4) THE LATEST 10K AND 10Q, OR IF A PRIVATELY HELD BUSINESS, LATEST AUDITED FINANCIAL STATEMENT AND LATEST QUARTER INCOME REPORT SHOULD BE FURNISHED.

1. APPLICANT INFORMATION

A) NAME (FIRST NAMED INSURED AND OTHER NAMED INSUREDS)

B) LIST ALL APPLICANTS' WEB SITES:

NON-OWNED AUTO LIABILITY

2. A) Number of Employees using their own vehicles for company business (include occasional or full-time use; i.e. sales, delivery mail pick up/delivery):

B) How often do employees drive their own vehicles for company business?

C) For What purpose?

3. A) Are MVR checks required on these employees?

Yes No

B) If yes, how often?

C) Who orders/checks?

4. What standards apply for evaluating MVRs? What is considered acceptable/unacceptable?

5. What actions are taken if an employee's driving record is considered unacceptable?

6. A) For those employees who use their own vehicles for company business (either full time or occasionally) does the applicant require the employee to carry primary limits?

Yes No

B) Are certificates of insurance obtained from the employee's auto insurer?

Yes No

C) Who verifies coverage, limits and carrier?

D) How will we know if an employee's auto insurance lapses mid term?

PLEASE ATTACH COPIES OF CURRENT MVRs FOR ALL POTENTIAL DRIVERS. THANKS.

HIRED AUTOMOBILE LIABILITY

7. How many vehicles are hired or borrowed each year?

Rented

Cars

Trucks

Trailers

Leased

8. For what purpose are the hired & borrowed vehicles used?

9. What is the average length of the hired/borrowed period for these vehicles?

10. What is the total annual cost for all hired & borrowed vehicles?

11. List the states where the vehicles are hired & borrowed.

12. A) Who provides the primary insurance for the hired & borrowed vehicles?

B) Are certificates of insurance obtained from the primary carrier?

Yes No

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- C) Who reviews the rental contract?
D) How are coverage, limits & carrier verified?

PLEASE ATTACH COPIES OF CURRENT MVRS FOR ALL POTENTIAL DRIVERS. THANKS.

13) PRIOR CARRIER INFORMATION

A)

**HIRED/NON-OWNED AUTO
LIABILITY**

CARRIER

POLICY LIMITS: PER ACCIDENT

PREMIUM

YEAR 20__	YEAR 20__	YEAR20__	YEAR 20__	YEAR ____

- B) HAS ANY INSURER EVER CANCELLED, RESTRICTED OR REFUSED TO RENEW YOUR POLICY OR ANY COVERAGE IN THE PAST 5 YEARS?
IF YES, PLEASE EXPLAIN:

YES NO

- C) HAS ANY DRIVER BEEN EXCLUDED, UNINSURED OR SELF-INSURED FROM ANY PREVIOUS COVERAGE?
IF YES, PLEASE EXPLAIN:

14. CLAIMS HISTORY – FIVE YEARS OR MORE (LOSS RUNS MUST BE FURNISHED)

A) TOTAL LOSSES, INCLUDING DEFENSE COSTS:

POLICY PERIOD	NO. OF CLAIMS	TOTAL AMOUNTS PAID		AMOUNTS IN RESERVE		VALUATION DATE
		INDEMNITY	EXPENSE	INDEMNITY	EXPENSE	
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

B) DESCRIBE INDIVIDUAL LOSSES, VALUED \$25,000 OR MORE, INCLUDING DEFENSE COSTS:

SIGNATURES ARE REQUIRED. SIGN AT THE END OF THE FRAUD NOTICES SECTION.

FRAUD NOTICES:

PRIOR TO SIGNING THIS APPLICATION, PLEASE REVIEW THE FOLLOWING STATUTORY FRAUD NOTICES AS THEY MAY APPLY TO THE APPLICANT'S DOMICILE.

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ARKANSAS: AR CODE §23-66-503 "ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON."

COLORADO: CO STAT. §10-1-127 "IT IS UNLAWFUL TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES, DENIAL OF INSURANCE AND CIVIL DAMAGES. ANY INSURANCE COMPANY OR AGENT OF AN INSURANCE COMPANY WHO KNOWINGLY PROVIDES FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO A POLICYHOLDER OR CLAIMANT FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE POLICYHOLDER OR CLAIMANT WITH REGARD TO A SETTLEMENT OR AWARD PAYABLE FROM INSURANCE PROCEEDS SHALL BE REPORTED TO THE COLORADO DIVISION OF INSURANCE WITHIN THE DEPARTMENT OF REGULATORY AGENCIES."

DISTRICT OF COLUMBIA: DC CODE §22-3825.9 "WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT."

FLORIDA: FL STAT. §817.234 "ANY PERSON WHO KNOWINGLY, AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE."

HAWAII: HI STAT. §431:10C-307.7 "FOR YOUR PROTECTION, HAWAII LAW REQUIRES YOU TO BE INFORMED THAT PRESENTING A FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT IS A CRIME PUNISHABLE BY FINES OR IMPRISONMENT, OR BOTH."

KENTUCKY: KY STAT. §304.47-030 "ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME."

LOUISIANA: LA STAT. §1424 "ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON."

MAINE: ME STAT. TI 24-1, §2186 "IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES OR DENIAL OF INSURANCE BENEFITS."

NEW JERSEY: NJ STAT. §17:33A-6 "ANY PERSON WHO INCLUDES ANY FALSE OR MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES."

NEW MEXICO: NM STAT. §59A-16C-8 "ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES."

OHIO: OH CODE §3999.21 "ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD."

OKLAHOMA: OK STAT. TI 36, §3613. "WARNING: ANY PERSON WHO KNOWINGLY, AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY."

OREGON Bulletin 98-5 ANY PERSON, WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION FOR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT MAY BE GUILTY OF INSURANCE FRAUD."

NON-OWNED & HIRED AUTO

SUPPLEMENTAL QUESTIONNAIRE (CONT'D)

PENNSYLVANIA: PA STAT. TI 18, §4117 "ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES."

RHODE ISLAND: RI GEN. LAWS §27-54-8 "THE FAILURE TO DISCLOSE A CONVICTION FOR ARSON MAY SUBJECT THE APPLICANT TO CRIMINAL PENALTIES."

TENNESSEE: TN CODE §56-53-111 "IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS."

VIRGINIA: VA CODE §52-40 "IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS."

OTHER STATES: WARNING: "ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE MAY BE GUILTY OF INSURANCE FRAUD, WHICH IS A CRIME, AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON."

NEW YORK: NY COMPILATION OF CODES, RULES & REGULATIONS TITLE 11, SECTION 86 "ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION."

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND CERTIFIES THAT REASONABLE ENQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO THE QUESTIONS ON THIS APPLICATION. HE/SHE CERTIFIES THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE. HE/SHE CERTIFIES THAT THE APPLICABLE FRAUD NOTICES HEREIN HAVE BEEN READ AND UNDERSTOOD.

Applicant Name (Name of Company)	Producer's Name
Signature of Authorized Representative	Producer's Signature
Print Name	Producer's Phone
Title	Producer's Fax
Date	Producer's Email