

SPECIALTY VEHICLE SUPPLEMENT

Applicant Name: _____ Operations: Dealer Non-Dealer

AUTOS	HEAVY VEHICLES
Autos (private passenger and light trucks) _____%	Bucket & Boom Trucks / Cherry Pickers _____%
Emergency Vehicles – Police Cars, Ambulances _____%	Buses – Provide Passenger Capacity _____%
Food Trucks _____%	Cranes _____%
Golf Carts - Licensed for Road Use _____%	Dump Trucks _____%
Military Vehicles _____%	Emergency Vehicles - Trucks _____%
Mopeds / Scooters (must be street legal) _____%	Logging Trucks / Equipment _____%
Motorcycles _____%	Refrigerated Vans / Trailers _____%
Municipal Vehicles _____%	Tankers / Tanker Trailers _____%
Recreational Vehicles / Motor Homes _____%	Truck - Heavy & Extra Heavy _____%
BOATS & WATERCRAFT	OFF ROAD VEHICLES
Boat / Watercraft _____%	ATV's (3 wheeler, 4 wheeler) _____%
Jet Ski _____%	Dirt Bikes / Motocross Cycles _____%
EQUIPMENT	Golf Carts - Not Licensed for Road Use _____%
Construction / Contractors Equipment _____%	Off Road - 4 x 4 _____%
Farm Equipment & Implements _____%	Snowmobile _____%
Forklifts _____%	TRAILERS
Lawn / Tree Service Equipment _____%	Travel Trailers / Campers (pull-behind) _____%
OTHER	Utility / Service (2,000 lb. capacity) _____%
_____ %	Trailers – Semi / Livestock _____%

1) BREAKDOWN OF WORK PERFORMED - COMPLETE ALL 3 CATEGORIES AS APPLICABLE TO TOTAL 100%

Body and / or Paint _____%	Radiator _____%
Blade Sharpening _____%	Refrigeration Unit _____%
Brakes _____%	Roll Bars / Cages _____%
Engine Overhaul _____%	Snow Plow Installation _____%
FMCSA Inspections (Answer #6) _____%	Suspension / Frame _____%
Fifth Wheel installation, service or repair _____%	Tank Cleaning – Internal _____%
Hydraulics – General _____%	Tank Repair – External _____%
Hydraulics – Lifting Apparatus _____%	Tire Repair or Replacement _____%
Oil & Lube _____%	Tune Up _____%
Power Train _____%	Wash & Detail _____%
Other _____%	Describe: _____
Fabrication and/or parts manufacturing _____%	Describe: _____
Storage or parking space rental _____%	Receipts: _____
Structural Alterations _____%	Describe: _____
Welding _____%	Describe: _____

EMERGENCY VEHICLES – complete above and:

Aerial Ladder Service _____%	Lights, Sirens & Radios _____%
Ground Ladder Service _____%	Pump Service _____%
Ladder & Hoses _____%	Pump Testing _____%

MOTORCYCLES – complete above and:

Custom Motorcycle Manufacturing _____%	
Custom Motorcycle Building _____%	(assembly, no fabrication)
Trike Conversion _____%	

2) OPERATIONS:

BOATS & WATERCRAFT:

Do you conduct any operations at a marina, or while any watercraft is in the water? Yes No
Do you make any repairs using fiberglass? Yes No

If yes, explain where resins are stored on site: _____

EMERGENCY VEHICLE OPERATIONS:

Qualifications and Training: _____

Are your mechanics EVT Certified? Yes No
Do you Install, sell or service medical equipment for ambulances or paramedic's vehicles? Yes No

MOTORCYCLE and OFF-ROAD VEHICLE OPERATIONS:

Do you permit off-premises test drives of motorcycles or any off-road vehicles? Yes No
If yes: Do you have a specific route? Yes No
Do you accompany using an owned vehicle? Yes No
Where do you go? _____
How far do you go? _____

Is anyone furnished with personal use of a Motorcycle or other off road vehicle? Yes No
Do you sell any vehicles that are not manufactured in the U.S.? Yes No
If yes, do you obtain them from a U.S. distributor? Yes No

RV, MOTORHOME & CAMPER OPERATIONS

Do you repair kitchen appliances, electrical wiring, or heating/cooling systems? Yes No
If yes, what percentage of your operation? _____ %

3) Where do you conduct operations?

Your Premises _____% Customer's Location _____% Roadside _____%

4) Do you take autos to Trade Shows, Fairs or Special Events? Yes No
If yes, where do you go / how many per year? _____/_____

5) Are your mechanics ASE Certified? Yes No
If no, how many years of related experience do you require? _____

6) Do you test drive any vehicles over 26,000 off-premises? Yes No
If yes, do your drivers possess CDL licenses? Yes No

7) If you do FMCSA annual vehicle safety inspections, does / has the Inspector:

- a. Understand the FMCSA inspection criteria? Yes No
- b. Mastered the inspection methods, procedures, tools and equipment? Yes No
- c. Successfully completed a State or Federal inspection training program? Yes No
- d. Have at least 1 year of training and/or experience consisting of:
 - Participation in a manufacturer sponsored training program; or
 - Experience as a mechanic or inspector:
 - In a motor carrier maintenance program; or
 - In a commercial garage; or
 - For a State or Federal Government? Yes No

Additional Information: _____

This questionnaire does not bind the Application nor the Company to complete the insurance, but it is agreed that the information contained herein shall be part of the basis of the contract should a policy be issued. By signing you are hereby certifying that all information is accurate to the best of your knowledge.

Signature of Agent

Date

Signature of Applicant