



MOTOR TRUCK CARGO APPLICATION

Insured Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

MC & Dot Numbers: (MC) \_\_\_\_\_ (DOT) \_\_\_\_\_

Common Carrier Authority (Y/N) \_\_\_\_\_ Intra City Only (Y/N) \_\_\_\_\_

Contract Carrier Authority (Y/N) \_\_\_\_\_ Oversized Weight (Y/N) \_\_\_\_\_

Broker Authority (Y/N) \_\_\_\_\_

List State Filings required: \_\_\_\_\_

GENERAL INFORMATION

How many years in business as common carrier? \_\_\_\_\_ Contract carrier: \_\_\_\_\_

List gross revenues in last 3 years: (year) \_\_\_\_\_ (\$\$) \_\_\_\_\_
(year) \_\_\_\_\_ (\$\$) \_\_\_\_\_
(year) \_\_\_\_\_ (\$\$) \_\_\_\_\_

Estimated revenue for next policy term: \_\_\_\_\_

Estimated mileage for next policy term: \_\_\_\_\_

Loss History

Table with 5 columns: Date, Cause of Loss (collision, theft, etc.), Type of Property, Amount Paid, Recovery

EMPLOYMENT PRACTICES

What is your minimum driver age? \_\_\_\_\_

Minimum years of CDL driving experience that you require? \_\_\_\_\_

In screening prospective drivers, what percentage are checked for:

MVRs \_\_\_\_\_% Criminal records \_\_\_\_\_% Drug use \_\_\_\_\_%

Describe MVR screening criteria & frequency of checks:

\_\_\_\_\_
\_\_\_\_\_

Are existing drivers subject to periodic checks? Please describe:

\_\_\_\_\_
\_\_\_\_\_

**OPERATIONS**

*Owned vehicles:*

Tractors: \_\_\_\_\_ Dry van trailers: \_\_\_\_\_ Reefers: \_\_\_\_\_ Flat beds: \_\_\_\_\_ Tankers: \_\_\_\_\_ Straight: \_\_\_\_\_

*Non-owned vehicles:*

Tractors: \_\_\_\_\_ Dry van trailers: \_\_\_\_\_ Reefers: \_\_\_\_\_ Flat beds: \_\_\_\_\_ Tankers: \_\_\_\_\_ Straight: \_\_\_\_\_

Radius:            Less than 150 miles: \_\_\_\_\_ %                            150 to 500 miles: \_\_\_\_\_ %  
                          501 to 1,500 miles: \_\_\_\_\_ %                            over 1,500 miles: \_\_\_\_\_ %

# of cargo units: \_\_\_\_\_

List major cities and ports served: \_\_\_\_\_

Load breakdown:

\_\_\_\_\_ % of loads hauled by you under your Bill of Lading  
\_\_\_\_\_ % of loads hauled by others under your Bill of Lading  
\_\_\_\_\_ % of loads from hauling under another carrier's Bill of Lading  
100% total

What dollar amount do you hold owner/operators liable for: \$ \_\_\_\_\_

List top commodities hauled by volume & maximum value:

<i>%</i>	<i>Commodity</i>	<i>Average Value</i>	<i>Maximum Value</i>

What percentage of your vehicles are equipped with:

Satellite tracking: \_\_\_\_\_ %                    Governors: \_\_\_\_\_ %                    Theft alarms: \_\_\_\_\_ %  
Trailers padlocked: \_\_\_\_\_ %                    Seals but not padlocked: \_\_\_\_\_ %

Are vehicles alarmed when unattended? \_\_\_\_\_

Are written reports kept of refrigeration maintenance? \_\_\_\_\_

What are the responsibilities of drivers to monitor and report refrigeration performance? \_\_\_\_\_

**TERMINALS TO BE INSURED**

Address: \_\_\_\_\_

Construction: \_\_\_\_\_ Security & hours of operation: \_\_\_\_\_

Address: \_\_\_\_\_

Construction: \_\_\_\_\_ Security & hours of operation: \_\_\_\_\_

Applicant Signature / Date

Producer Signature / Date