



Motor Truck Cargo Application
 Scheduled Vehicle Policy
 v8.13PAQ

Agency Information

Agency Name _____ Producer Code _____
 Address _____
 City _____ State _____ Zip _____

Applicant Information

Applicant _____
 Address _____
 City _____ State _____ Zip _____
 Contact Name _____ Phone Number _____
 Years In Business _____ DOT # _____ State Authority # _____
(under current authority)
 Effective Date _____ Expiration Date _____

| | | | | | |
|---|--------------------------------|--------------------------------|--|--------------------------|--------------------------|
| Action | <input type="checkbox"/> Quote | <input type="checkbox"/> Issue | Does agent currently write this account? | Yes | No |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Present Carrier | _____ | | Premium/Rate | _____ | |
| Has cargo coverage been cancelled or non-renewed in the past 3 years? | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Has applicant filed bankruptcy within the past 3 years? | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Has applicant had authority under a different name in the past 3 years? | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes | Name of prior authority _____ | | | | |
| | DOT# of prior authority _____ | | | | |

Type of Operation - (Check all that apply)

| | | |
|--|---|---|
| <input type="checkbox"/> Dry Van / Box | <input type="checkbox"/> Refrigerated Freight | <input type="checkbox"/> Household Goods |
| <input type="checkbox"/> Flat Bed | <input type="checkbox"/> Oversized / Overweight | <input type="checkbox"/> Double Trailers |
| <input type="checkbox"/> Automobile Hauler | <input type="checkbox"/> Containerized Freight | <input type="checkbox"/> Mobile Home Hauler |

Type of Carrier

Common Carrier Contract Carrier Freight Forwarder Freight Broker

Filings Required

FMCSA / BMC 34 State(s) _____

Radius of Operations

_____ % under 300 miles _____ % 301 to 500 miles _____ % 501 to 1,500 miles _____ % over 1,500 miles

Target Cities (check all that apply)

(based or transported to or from more than 10 times / calendar year)

Los Angeles, CA New York, NY Newark, NJ Miami, FL Chicago, IL

Limits of Insurance

\$ _____ on any one vehicle in transit \$ _____ increased limit for specific shipper
 \$ _____ any one loss Shipper Name _____

Deductible

\$1,000 \$2,500 \$5,000 Other _____

Optional Coverages

- Spoilage / Freezing Coverage \$ _____ Deductible - (Provide Reefer Trailers / Equipment Below)
- MTC Additional Coverages Plus Endorsement Livestock Downgrading Coverage
- Pollutant Clean Up (\$10,000 limit) Specified Causes of Loss
- Owners Goods Extension
- Non Owned Trailer / Container Coverage \$ _____ limit any one trailer / container

Terminals (list terminal location(s) if coverage is desired)

| Limit | Terminal Location Address | Construction |
|----------|---------------------------|--------------|
| \$ _____ | _____ | _____ |
| \$ _____ | _____ | _____ |
| \$ _____ | _____ | _____ |

Theft Exposure

| | Yes | No |
|---|--|---|
| Are vehicles EVER left Loaded and Unattended? If yes , please describe _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Does applicant EVER leave Loaded Trailers Detached from power units? If yes , please describe _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| What security is provided for loaded vehicles? (check all that apply) | | |
| At locations | <input type="checkbox"/> Fenced Lot | <input type="checkbox"/> Security Guards |
| | <input type="checkbox"/> Kingpin Locks | <input type="checkbox"/> Vehicle Theft Alarms |
| | | <input type="checkbox"/> Cameras |
| | | <input type="checkbox"/> In Locked Building |
| In transit | <input type="checkbox"/> GPS Device | <input type="checkbox"/> Armed Guard in Vehicle |
| | <input type="checkbox"/> Vehicle Theft Alarm | <input type="checkbox"/> Other _____ |

Loss Experience (past 3 years)

| | | | | Yes | No |
|---|-------------|----------|------------------|------------------------------|-----------------------------|
| Any losses within the past 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No Hard Copy Loss Runs Attached? | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Policy Period | Amount Paid | # Claims | Cause(s) of Loss | Open Claim? | |
| | \$ _____ | | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | \$ _____ | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | \$ _____ | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | \$ _____ | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | \$ _____ | | | <input type="checkbox"/> | <input type="checkbox"/> |

Applicant's Driver Guidelines (indicate each that apply)

- MVR's obtained on all drivers at least annually. Number of moving violations (max in 3 yrs)
- Minimum Years Experience _____ Minimum Age _____ Maximum Age _____

Schedule of Drivers *(complete below or attach a schedule)*

| Driver's Name | Date of Birth | Drivers License Number | Years of Experience | Employment Date | # viol's / accd's past 3 years |
|---------------|---------------|------------------------|---------------------|-----------------|--------------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Safety & Maintenance

| | Yes | No |
|--|--------------------------|--------------------------|
| Is there a formal Safety Program in place? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please describe _____ | | |
| Explain your Maintenance Program, (ie, frequency, performed by whom, etc.) _____ | | |

Schedule of Power Units *(complete below or attach a schedule)*

| Year | Make | VIN | Limit |
|------|------|-----|-------|
| | | | |
| | | | |
| | | | |
| | | | |

Schedule of Refrigerated Trailers *(complete below or attach a schedule)*

| Year | Make | VIN | Limit |
|------|------|-----|-------|
| | | | |
| | | | |
| | | | |
| | | | |

Commodities Hauled

| Commodity | % of Total | Commodity | % | Commodity | % |
|---|------------|---|---------|--|---------|
| Air Conditioning equipment | _____ % | Electrical Equipment | _____ % | Oversized or Overweight | _____ % |
| Air Freight | _____ % | Electrical Supplies | _____ % | Paper & Paper Products | _____ % |
| Aircraft Engines | _____ % | Farm machinery | _____ % | Perfume | _____ % |
| Aircraft Parts (not engines) | _____ % | Feed | _____ % | Petroleum Products | _____ % |
| Appliances (Major) | _____ % | Fertilizer (Bagged) | _____ % | Pharmaceuticals - (over the counter) | _____ % |
| Appliances (Small) | _____ % | (In Bulk) | _____ % | Pharmaceuticals - (prescriptions) | _____ % |
| Auto accessories/parts (not tires) | _____ % | Fiber Optic cable | _____ % | Photographic/Sound/Video(equipment) | _____ % |
| Automobiles | _____ % | Fine Arts* | _____ % | (CDs, DVDs, Film Tapes) | _____ % |
| Asphalt | _____ % | Firearms | _____ % | Pianos | _____ % |
| Baked Goods | _____ % | Flour | _____ % | Pine Needles | _____ % |
| Batteries | _____ % | Flowers (cut) | _____ % | Plants, Shrubs & Trees | _____ % |
| Beverages - Beer | _____ % | Food (Frozen/not seafood) | _____ % | (not temp controlled) | _____ % |
| - Liquor | _____ % | Furniture (new) | _____ % | (temp controlled) | _____ % |
| - Soft Drinks | _____ % | Garden Ties | _____ % | Plastic Products | _____ % |
| - Wine | _____ % | Golf Carts | _____ % | Plumbing Supplies | _____ % |
| Blood/tissue/organs | _____ % | General Dry Freight (mixed loads) | _____ % | Poultry (not live) | _____ % |
| Boats | _____ % | Grain | _____ % | Precious metals & Alloys* | _____ % |
| Bottles - Glass | _____ % | Gravel & Rock | _____ % | Printed Materials | _____ % |
| Bottles - Plastic | _____ % | Groceries | _____ % | Produce (vegetables etc.) | _____ % |
| Building Materials | _____ % | Hay | _____ % | Railroad Ties | _____ % |
| Bullion* | _____ % | Hardware | _____ % | Recreational Vehicles | _____ % |
| Butter | _____ % | Household Goods & Office Furniture | _____ % | Red Label Placard shipments (other | _____ % |
| Candy | _____ % | Ice Cream | _____ % | than petroleum, fertilizer & asphalt) | _____ % |
| Canned Goods | _____ % | Iron (raw or coils) | _____ % | Rigging (property requiring) | _____ % |
| Carpet (not oriental) | _____ % | Jewelry & Jewels* | _____ % | Rubber products (not tires) | _____ % |
| Oriental Rugs | _____ % | Livestock (up to 300 Miles) | _____ % | Salt (in bulk) | _____ % |
| Caskets | _____ % | Livestock (300+ Miles) | _____ % | Sand (in bulk) | _____ % |
| Cement | _____ % | Logs | _____ % | Seafood (fresh) | _____ % |
| Cheese | _____ % | Lumber | _____ % | Seafood (frozen) | _____ % |
| Chemicals | _____ % | Machinery (heavy or precision) | _____ % | Securities & Checks* | _____ % |
| China/glassware/pottery | _____ % | Machinery (light & non-precision) | _____ % | Spas/Hot Tubs | _____ % |
| Cigarettes/Cigars & tobacco products | _____ % | Medical Equipment/MRI Units | _____ % | Sporting Goods | _____ % |
| Clothing & shoes (not listed below) | _____ % | Meat (boxed) | _____ % | Stationary | _____ % |
| - Athletic | _____ % | Meat (swinging) | _____ % | Steel (Raw or Coils) | _____ % |
| - Blue Jeans | _____ % | Memorabilia/Collectibles | _____ % | Stone Products (marble, etc.) | _____ % |
| - Furs* | _____ % | Metals (non-ferrous) | _____ % | Swimming Pools | _____ % |
| - Designer | _____ % | Metal Products (Finished) | _____ % | Tar | _____ % |
| - Tee Shirts | _____ % | Milk | _____ % | Textiles | _____ % |
| Coal | _____ % | Mobile Homes | _____ % | Tires | _____ % |
| Construction Equipment | _____ % | Motorcycles | _____ % | Tobacco (Raw/unprocessed) | _____ % |
| Containerized Freight (up to 300 miles) | _____ % | Money* | _____ % | Tools | _____ % |
| Containerized Freight (300+ miles) | _____ % | Mulch | _____ % | Top Soil & Fill | _____ % |
| Cosmetics | _____ % | Musical instruments (other than pianos) | _____ % | Toys & Crafts | _____ % |
| Cotton | _____ % | Office Products | _____ % | Transformers & Turbines | _____ % |
| Department Store Mdse. | _____ % | Ore | _____ % | Wire (not fiber optic) | _____ % |
| Eggs | _____ % | Other | _____ % | Wood Products (other than furniture & caskets) | _____ % |

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 act, which is a crime and shall be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for such violation.

Applicant Signature _____

Date _____

Agent Signature _____

Date _____