



## MOTORCYCLE & OFF-ROAD VEHICLE QUESTIONNAIRE

Business Trade Name \_\_\_\_\_

1. What percentage of your operations involve:

Motorcycles	%	Dune Buggies/Sand Rails	%
ATV's	%	Go-Karts	%
Dirt Bikes	%	Snowmobiles	%
Mopeds/Scooters <i>Provide lowest # of CCs _____</i>	%	Other (describe):	%

2. Are all of the units held for sale manufactured in the U.S.?  Yes  No

If "No" provide name and address of distributor located within the U.S.:

3. Is above inventory stored inside a building at night?  Yes  No

If "Yes", do you have a Central Station Alarm (CSA)?  Yes  No

If not inside and/or no CSA, provide details:

4. Do you permit off premises test drives?  Yes  No

If "Yes", do you have a specified route?  Yes  No

a. Is this route a distance of one (1) mile or less?  Yes  No

If "No", provide details:

b. Do you allow customers under age twenty-one (21) to test drive?  Yes  No

c. Do you require customers to have a motorcycle license?  Yes  No

5. Do you permit overnight tryouts?  Yes  No

6. Is anyone furnished one of these vehicles for personal use or as a demo?  Yes  No

If "Yes", provide details (who, type of vehicle):

7. Do employees who drive have the required endorsement on their Driver's License?  Yes  No  N/A

8. What are your annual sales to customers for each of these categories? (add Related Operations)

Uninstalled Parts \$ \_\_\_\_\_ Clothing & Accessories \$ \_\_\_\_\_

**9. Racing**

**a.** Do you own a vehicle with a racing or exhibition exposure? .....  Yes  No

If "Yes", provide details:

**b.** Do you service any vehicles involved in racing or exhibition events? .....  Yes  No

If "Yes", \_\_\_\_\_ %

Details:

**10. Do you perform any of the following?**

Alter original performance specifications	%	Fuel Conversions	%
Customization or Fabrication	%	Structural Alterations (Fork & Frame)	%
Custom Building	%	Tires Sales & Service	%

If any of the above, provide details (*Answer #11 for Tires*):

**11. If you sell, install or service tires complete the following section:**

**a.** What percentage of tires sold are: New Tires \_\_\_\_\_%      Used Tires \_\_\_\_\_%

**b.** What tire service work do you perform? (check all that apply)

Fixing Flats     Tire Rotation     Tire Siping     Comp Cutting

Other (describe): \_\_\_\_\_

**c.** What percentage of your work is:

Specialty Tires \_\_\_\_\_%    Off Road \_\_\_\_\_%    Racing \_\_\_\_\_%

**d.** Do you perform quality control to verify proper installation? .....  Yes  No

**e.** Do you sell new tires manufactured more than three (3) years ago? .....  Yes  No

**12. Do you convert bikes to trikes? .....  Yes  No**

If "Yes", provide details. If kit is used, include name of kit manufacturer:

**13. Do you loan or rent motorcycles? .....  Yes  No**

If "Yes", is coverage for this exposure in place elsewhere? .....  Yes  No

**THIS SUPPLEMENTAL APPLICATION IS INCORPORATED BY REFERENCE INTO THE PRIMARY APPLICATION**

APPLICANT'S SIGNATURE	DATE
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