



TRUCKERS
GENERAL LIABILITY SUPPLEMENT
(Complete in addition to ACORD Application)

Proposed First Named Insured & Other Named Insured(s):

Location Address Street City County State ZIP Code

BUSINESS INFORMATION

1. Describe your operations and cargo being hauled:

2. Fleet size (units):

3. Radius of Operations:

4. Are there independent contractors hauling on your behalf? [] Yes [] No
If yes, do they carry General Liability coverage with limits equal to those being requested? [] Yes [] No

EXPLAIN ALL "YES" ANSWERS BELOW

- 5. a. Are there any underground storage tanks on any owned or leased property?
b. Do you sell fuel or other products?
c. Do you perform any brokerage, freight forwarding or consolidation operations?
d. Do you have any past or present operations involving treating, discharging, applying, disposing or transporting hazardous materials?
e. Do you haul containers or containerized freight?
f. Do you loan or rent any machinery or equipment, other than motor vehicles, to others?
g. Are any of your vehicles unlicensed or not covered under an auto policy?
h. Do you perform any vehicle repairs on vehicles other than your own vehicles?
i. Do you perform stevedoring or rigging operations?
j. Is Garage or Garagekeepers coverage needed?
k. Do you haul household goods?
l. Is there a New York exposure?
m. Do you store goods of others?
n. Do you haul any oversize/overwide loads?
o. Do you deliver dirt to residential construction sites?

Provide full detailed explanations for all YES answers.

6. Do you haul any of the following:

ammonia nitrate, anhydrous ammonia, biotech products, bulk chemicals, coal, compressed gas (LPG, propane, etc.), contaminated soil, explosives including fireworks, flammable liquids (including gasoline), guns or munitions, hazardous waste, iron ore, pharmaceuticals, radioactive materials, refuse or waste (including waste from sewage treatment plants) or hazardous substances requiring auto liability limits in excess of \$1,000,000.

[] YES [] NONE of these listed commodities

If yes, describe:

**IMPORTANT NOTICE
DECLARATION**

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE.

As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.

SIGNATURES

Applicant Signature	Title	Date
---------------------	-------	------

Producer Signature	Date
--------------------	------

Producer Name and Address
