

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

Location Address	Street	City	County	State	ZIP Code
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Rental Agreements are required and should be written in accordance with the UCC and include a hold harmless provision protecting the retailer and transferring liability to the lessee; An assumption of risk by the lessee for damage to the lessor's property.

BUSINESS INFORMATION

1. Number of years' experience: _____
2. Total number of employees: _____
3. List equipment being rented (if available, attach Equipment Schedule):

4. Describe work being done:

- | | Yes | No |
|--|--------------------------|--------------------------|
| 5. Any consumer rental (i.e. for personal homeowner use in lieu of experience/licensed contractors on all contractor/construction/industrial equipment)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Do you perform off-premises consultation, installation or repair and maintenance service on any equipment? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Do you rent any of the following equipment: Derricks and power shovels; Log splitters; Demolition equipment; Drilling rigs? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Any sales of used equipment?
If yes, describe and include any warranties or guarantees. | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Is all equipment rented with operator?
If any equipment is rented without operator, a copy of the contract is required. | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Do any operators ever run the jobs? | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Do any jobs last longer than 30 days? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Do you make a thorough study of the subsurface, including identification of existing utility pipes and lines?
Explain: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Is all self-propelled mobile equipment transported to job site on trailers?
Explain: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Do you hold other persons' property for service, storage or repair?
Explain: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Any rental of the following: | Yes | No |
| a. Barricades, Temporary Roadways, Access Mats or other road markings | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Skidders or other logging equipment | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Trailer hitches | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Ladders | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Scaffolds | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Aerial work platforms | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Trailers | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Farm equipment | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Boilers | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Portable or hazardous waste tank | <input type="checkbox"/> | <input type="checkbox"/> |
| Explain: _____ | | |

**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
