

Repair And Service Operations Supplemental Application

TO BE USED WITH COMMERCIAL GENERAL LIABILITY APPLICATION (ACORD 125), or OTHER SIMILAR APPLICATION.

All questions must be answered in full. Application must be signed and dated by the applicant.

Applicant's Name _____ Agent _____

Applicant Mailing Address _____ Applicant's Phone Number _____
_____ Web Address _____
_____ Inspection Contact _____

Proposed Policy Period ____ to ____ Phone Number for Inspection Contact: _____

Applicant is Individual Partnership Corporation Joint Venture Other _____

Location #1 _____
Location #2 _____
Location #3 _____

NATURE OF YOUR BUSINESS

Repair Shop Body Shop Gas Station Parking Facility Other _____

UNDERWRITING INFORMATION

1. How many years of experience do you have in this field? _____
2. How many autos do you own? _____
3. Are autos stored inside a building? Yes No
If yes, does building have? Sprinklers Alarm
What is the building construction? ____ What is the protection class? ____
4. If autos are stored outside, describe lot. Standard Non-Standard Un-Fenced

Standard open lots are open parking storage lots enclosed on all sides by a metal cyclone or equivalent fence not less than six feet in height; or bounded on one or more sides by the wall or walls of a building, with no unprotected openings, and the exposed sides of the lot enclosed by a metal cyclone or equivalent fence not less than six feet in height, with openings securely locked when unattended.

Non-standard open lots are all other open lot locations, or unroofed space and buildings not securely enclosed and locked when unattended.

5. What precautions are taken to prevent theft or vandalism damage to the following:
a. Customers' Autos _____
b. Employees' Tools _____
6. Are used rags stored in a metal container and picked up daily? Yes No
7. Verify "no smoking" is allowed in shop. _____
8. Verify all paint is stored in metal cabinets. _____
9. Does applicant have a sign posted in the customer reception / waiting area stating applicant assumes no liability for any items left inside vehicles left for service or repair? Yes No
10. What controls are in place for the keys? Describe. _____
11. Is a standard automotive work order used? Yes No

UNDERWRITING INFORMATION (CONTINUED)

EXPLAIN ALL "YES" RESPONSES

Do You

- 1. Have Commercial Auto insurance for all owned, non-owned and hired autos? Yes No
- 2. Have any dealer plates or transfer tags? Yes No
- 3. Have a dealer's license? Yes No
- 4. Have signs posted restricting customers from entering work areas? Yes No
- 5. Conduct structural alterations or frame straightening? Yes No
If yes, complete Frame Straightening Supplemental Application, S320FRs.
- 6. Engage in any other operations? If yes, specify below Yes No
- 7. Engage in auto dismantling or salvage operations? Yes No
- 8. Engage in split rim work? Yes No
- 9. Have any security guards? Yes No
Are they employees? Yes No
Are they subcontractors? Yes No
If they are subcontractors, do you obtain certificates of insurance? Yes No
- 10. Have guard dogs? Yes No
If yes, are they confined during business hours? Yes No
- 11. Have underground storage tanks? Yes No
- 12. Install or repair trailer hitches? Yes No
If yes, are they pre-manufactured? Yes No
Will you custom fabricate and install trailer hitches? Yes No
- 13. Modify vehicles for performance, style or handling characteristics? Yes No
- 14. Own or operate tank trucks? Yes No
- 15. Rent, lease or loan vehicles, machinery or equipment to others? Yes No
From others? Yes No
- 16. Repossess vehicles? Yes No
- 17. Sell any used parts? Yes No
- 18. Sell or distribute butane, propane or other liquefied gas? Yes No
- 19. Sell recaps? Yes No
- 20. Sell used tires? Yes No
- 21. Sponsor or own any race cars? Yes No
- 22. Sponsor sporting or social events? Yes No
- 23. Have any special hazards on premises (i.e. Cooking, flammables, woodworking, etc)? Yes No
- 24. Operate a tow truck service for hire? Yes No
- 25. Provide valet parking services? Yes No
- 26. Operate a storage / impound lot? Yes No

Explain. _____

UNDERWRITING INFORMATION (CONTINUED)

INDICATE WHAT PERCENTAGE OF THE FOLLOWING OPERATIONS YOU PERFORM

- 1. Auto mechanical repair % Sales ___ % Repair
- 2. Auto parts sales % Sales ___ % Repair
- 3. Boats, jet skis or other water craft % Sales ___ % Repair
- 4. Body painting or repair % Sales ___ % Repair
- 5. Brake work % Sales ___ % Repair
- 6. Farm or heavy equipment % Sales ___ % Repair
- 7. Gasoline or diesel sales % Sales ___ % Repair
- 8. Foreign sports cars, classic autos, antique autos or fiberglass body autos..... % Sales ___ % Repair
- 9. Grocery or liquor sales % Sales ___ % Repair
- 10. Late model used automobiles and light trucks % Sales ___ % Repair
- 11. Mobile homes, motor homes or other recreational vehicles % Sales ___ % Repair
- 12. Motorcycles, ATV's etc..... % Sales ___ % Repair
- 13. Trucks, tractors, trailers (Complete Truck & Heavy Truck Supplemental Application, S320TR) ... % Sales ___ % Repair
- 14. Vehicles where the frame or body is modified, e.g., van conversions, etc % Sales ___ % Repair
- 15. Other _____ % Sales ___ % Repair

Remarks _____

REQUESTED COVERAGE & LIMITS

COMMERCIAL GENERAL LIABILITY	GENERAL AGGREGATE LIMIT	_____	PER CLAIM DEDUCTIBLE
	PRODUCTS/COMPLETED OPERATIONS	_____	\$ _____ BI
	PERSONAL/ADVERTISING INJURY	_____	\$ _____ PD
	EACH OCCURRENCE	_____	
	DAMAGE TO PREMISES RENTED TO YOU	_____	
	PREMISES MEDICAL PAYMENTS	_____	

REPAIR & SERVICE OPERATIONS LEGAL LIABILITY	Loc. 1	PER AUTO	PER LOCATION	DEDUCTIBLE
	SPECIFIED CAUSES OF LOSS	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS
	COLLISION	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS

REPAIR & SERVICE OPERATIONS LEGAL LIABILITY	Loc. 2	PER AUTO	PER LOCATION	DEDUCTIBLE
	SPECIFIED CAUSES OF LOSS	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS
	COLLISION	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS

REPAIR & SERVICE OPERATIONS LEGAL LIABILITY	Loc. 3	PER AUTO	PER LOCATION	DEDUCTIBLE
	SPECIFIED CAUSES OF LOSS	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS
	COLLISION	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS

MISCELLANEOUS TOOLS – IM (VALUE OF \$1,500 OR LESS) \$1,000 DEDUCTIBLE	TOOL DESCRIPTION	LIMIT PER ITEM (MAXIMUM POLICY LIMIT: \$10,000)
	Attach a separate sheet, if needed.	

NOTICE – The policy of insurance applied for does not provide coverage as required by Environmental Protection Agency (EPA) 40 CFR Parts 280 and 281 for underground storage tanks nor any coverage under CERCLA or similar state or federal environmental act(s). **THIS POLICY EXCLUDES ALL COVERAGE FOR POLLUTION.**

This application shall not be binding unless and until confirmation by the company or its duly appointed representative has been given, and that a policy shall be issued and a payment shall be made, and then only as of the commencement date of said policy and in accordance with all terms thereof. The said applicant hereby makes these covenants and agrees that the foregoing statements and answers are a complete and true statement of all facts and circumstances involving the risk to be insured. The same are hereby considered a representation on the part of the insured, and made as the basis and conditions for which coverage will be granted.

Producer's Signature	Date	Applicant's Signature	Date
----------------------	------	-----------------------	------

IMPORTANT NOTICE

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

FRAUD STATEMENT

Any person who knowingly and with intent to defraud any insurance company or other person who files an application for insurance containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, is guilty of a crime and may be subject to fines and confinement in prison.