



SPECIALTY VEHICLE SUPPLEMENTAL APPLICATION

Applicant Name: _____

Operations: Dealer Non-Dealer

TYPES OF VEHICLES

Private Passenger Autos and Light Trucks	%	Mobile Homes	%
Cruiser / Touring styled Motorcycles (ie. Harley Davidson)	%	Recreational Vehicles / Motor Homes	%
Sport / Speed styled Motorcycles (ie. Buell, Ducati, CBR)	%	Travel Trailers / Campers / 5 th Wheel	%
Moped, Goped, Scooters (must be street legal)	%	Utility Trailers/ Service Trailers / Horse Trailers (max load capacity of 2,000 lbs)	%
Dirt Bikes / Motocross cycles	%	Semi Trailers / Livestock Trailers	%
ATV's (3 wheel, 4 wheel, or other off road vehicles)	%	Heavy Truck (26,001 – 45,000 GVW)	%
Snowmobile	%	Extra Heavy Truck (over 45,001 GVW)	%
Contractors Equipment / Dump Truck – <i>list types here:</i>	%	Bucket Truck / Cherry Picker / Vehicle with a man lift. Is man lift repaired/ serviced by risk? <input type="checkbox"/> Yes <input type="checkbox"/> No	%
Farm Tractor, Equipment or Implements – <i>list types here:</i>	%	Boat / Watercraft - other than jet ski	%
Buses <input type="checkbox"/> School bus <input type="checkbox"/> Public Transport Capacity: _____	%	Jet Ski / Personal Watercraft	%
Other: _____			

OPERATIONS:

Yes No Welding If yes, what is welded: _____

Yes No Hydraulic Work If yes, what does the hydraulic operate: _____

Yes No Structural Alterations If yes, describe: _____

Yes No Parts Manufacturing If yes, describe: _____

Yes No Manufacturing / Fabrication (other than parts) If yes, describe: _____

Yes No Tanker Sales / Repair If yes, interior clean out? Yes No Exterior clean/wash? Yes No

Yes No Refrigerated Truck or Trailer Sales / Repair

Yes No Custom Auto Assembly / Bike Building (Pre-manufactured frame & parts)

Yes No Custom Motorcycle Manufacturing (parts manufactured by the risk)

Yes No Storage or Parking Space Rental If yes, receipts: _____

Yes No Are autos taken to Trade Shows, Fairs or Special Events? If yes, how many per year? _____

Annual Receipts for: Accessory sales \$ _____ Uninstalled Parts sales \$ _____ Grocery & Supplies \$ _____

Locations where operations are conducted: Your Premises _____% Customer Premises _____% Roadside _____%

This questionnaire does not bind the Application nor the Company to complete the insurance, but it is agreed that the information contained herein shall be part of the basis of the contract should a policy be issued. By signing you are hereby certifying that all information is accurate to the best of your knowledge.

Signature of Agent

Date

Signature of Applicant