



Western Heritage Insurance Company

P.O. Box 5100, Scottsdale, Arizona 85261
9200 E. Pima Ctr. Pkwy., Ste. 350 Scottsdale, Arizona 85258
1-800-873-9442
A STOCK COMPANY

Wholesale Auto Dealer Supplemental Application

(Complete in addition to a general information Application. ACORD is acceptable.)

ANSWER ALL QUESTIONS—IF THEY DO NOT APPLY, INDICATE "NOT APPLICABLE".

Applicant's Name (Wholesale Auto Dealer):

Guidelines and Agreement

Anyone applying for this insurance must qualify under the following guidelines and agree to the terms.

Auto Wholesaler (includes Auto Broker) is one who buys or sells used autos to or from retail auto dealers. Auto Wholesalers may not sell directly to the public.

The company does not provide coverage to furnished autos for individual use unless furnished to an insured or employee in the state where you are licensed as a wholesale auto dealer. Anyone furnished an auto must be reported to the company and, if acceptable, will be listed on the "Schedule of Drivers Furnished Autos" form attached to the policy.

General Information

1. Is the applicant an auto wholesaler per the above description? Yes No
If no, describe:

2. Please provide percentage from where the sale of autos takes place?
Internet Sales % At Auctions %
From a Sales Lot % Phone Sales %

3. Do you sell autos to the public? Yes No
If yes, explain:

4. The general information Application questions apply to the primary location and any other(s) where you operate from or display or store covered autos.
a. Although you may hold a wholesale auto dealer license in one state, what is the address of your primary location?
b. Do you display or store covered autos at your primary location? Yes No
c. Secondary location where you operate from or display or store covered autos:

d. Describe other locations and their use: _____

5. Are your primary or other locations insured under other policies?..... Yes No

If yes, indicate insurance carried below:

Garage Insurance

General Liability Insurance

Other Commercial Insurance, describe: _____

6. Please list the major auctions you attend, in order of most frequented:

City & State: _____ City & State: _____

City & State: _____ City & State: _____

7. The company offers liability and physical damage coverage for pick up and delivery of covered autos up to five hundred (500) miles from point of purchase to destination. Do you pick up and deliver autos over five hundred (500) miles? Yes No

If yes:

a. Indicate distance in miles and from where to where: _____

b. Are employee drivers used?..... Yes No

If yes, how many: _____ How often:..... _____%

c. Are contract driver used? Yes No

If yes, how many: _____ How often:..... _____%

d. Do you verify that contract drivers have valid driver licenses?..... Yes No

e. Do you use drivers other than employees or contract drivers? Yes No

If yes, describe: _____

f. Does your auto dealer customer arrange for pick-up and delivery of autos you have purchased for them?..... Yes No

If no, describe method of delivery: _____

g. Do you hire a towing service? Yes No

If yes, do you verify each time the towing service carries insurance?..... Yes No

Dealer Plates and Registration Plates

It is warranted by the applicant that use and control of Dealer Plates includes the following:

Customer test drives but only while accompanied by the insured or insured's representatives;

Verify test driver is twenty-one (21) years old and holds a valid driver's license and personal auto insurance policy;

Operation of covered autos using dealer plates will include being driven for the purpose of test drives, servicing, washing, detailing or similar activity that is usual to garage operations;

Movement of covered autos from the point of purchase to the final destination; and

No loaning of dealer or registration plates as it is prohibited except as described above.

1. Please provide number of dealer plates: _____

2. Describe uses of dealer plates: _____

3. Do you have registration plates (not dealer plates) that are not issued for a specific auto?..... Yes No
 If yes:
 a. List registration plate numbers: _____
 b. Describe how they are being used: _____

Schedule of Employees and Drivers

Please complete:

Name	DOB	Driver License No. & State	Furnished Auto? Yes or No	MVR Attached? Yes or No	Job Title or Duties

Fraud Warnings: Attach completed WHI APP-152.

Applicant or authorized representative of the applicant, confirm and warrant that all of the above are true and accurate representations of my garage operation.

 Applicant's Name/Title

 Applicant's Signature (Must be signed by an authorized representative, owner, partner or executive officer) Date

 Producer's Signature Date