

## COAL TRUCKERS' COMMERCIAL AUTOMOBILE SUPPLEMENTAL APPLICATION

BY COMPLETING THIS APPLICATION, THE APPLICANT IS APPLYING FOR COVERAGE WITH **ROCKWOOD CASUALTY INSURANCE COMPANY**, A LICENSED INSURER.

QUOTATION REQUESTED BY \_\_\_\_\_  ISSUE POLICY  
(DATE)

AGENCY NAME \_\_\_\_\_ CODE NO. \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

NAME OF APPLICANT AND TRADE NAME \_\_\_\_\_

1. IS APPLICANT REQUIRED TO CARRY AN ICC FILING?     YES     NO
2. IS PUC FILING REQUIRED?     YES     NO    IF YES, DOCKET NO. \_\_\_\_\_
3. HOW LONG HAS APPLICANT BEEN ENGAGED IN BUSINESS? \_\_\_\_\_
4. WHAT IS MAXIMUM OPERATING RADIUS IN MILES? \_\_\_\_\_
5. HOW MANY TRIPS MADE DAILY? \_\_\_\_\_
6. NAME OTHER STATE APPLICANT IS LICENSED IN? \_\_\_\_\_
7. DESCRIBE BELOW MAINTENANCE AND INSPECTION METHODS AND FACILITIES USED BY APPLICANT

A. WHERE LOCATED \_\_\_\_\_

B. NAME OF FACILITY \_\_\_\_\_

SPECIFY COMMODITIES HAULED AND PERCENTAGE THEREOF \_\_\_\_\_

DO YOU TRANSPORT COMMODITIES CONSIDERED HAZARDOUS OR EXPLOSIVE?

THE INFORMATION BELOW WILL BE PERTINENT IN DETERMINING, IN THE EVENT OF A LOSS, WHETHER YOUR COVERAGE IS PRIMARY OR EXCESS. IN THIS INSTANCE, THE DEFINITION OF LESSEE MEANS THE COMPANY OR THE INDIVIDUAL YOU ARE HAULING FOR.

NAME AND ADDRESS OF OTHERS THAT YOU LEASE VEHICLES TO:	DOES LESSEE HAVE HIS/HER OWN PUC AND DO YOU HAUL UNDER IT?	DOES LESSEE REQUIRE TO BE NAMED AS ADDITIONAL INSURED?	ARE CERTIFICATES OF INSURANCE REQUIRED?

ATTACHED PHOTOGRAPHS OF VEHICLES – FRONT, BACK AND SIDES.

IN COMPLIANCE WITH PUBLIC LAW 91-508, AS PART OF OUR UNDERWRITING PROCEDURE, AN INQUIRY MAY BE MADE WHICH WILL PROVIDE 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, WILL BE PROVIDED.

I HEREBY DECLARE TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT ALL OF THE FOREGOING STATEMENTS IN THIS APPLICATION ARE TRUE AND THAT THESE STATEMENTS ARE OFFERED AS AN INDUCEMENT TO THE COMPANY TO ISSUE THE POLICY FOR WHICH I AM APPLYING.

I HEREBY AUTHORIZE ROCKWOOD CASUALTY INSURANCE COMPANY TO ORDER A MOTOR VEHICLE RECORD ON MYSELF AND ANY MEMBER OF MY FIRM LISTED ON THIS APPLICATION

MUST BE SIGNED BY APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_  
(PERSONAL SIGNATURE OF APPLICANT)

I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THE ABOVE SIGNATURE IS THE PERSONAL SIGNATURE OF THE APPLICANT.

MUST BE SIGNED BY REPRESENTATIVE \_\_\_\_\_ DATE \_\_\_\_\_  
(SIGNATURE OF REPRESENTATIVE)

**THIS SUPPLEMENTAL APPLICATION IS INCORPORATED BY REFERENCE INTO THE PRIMARY APPLICATION**