



Automobile Supplemental

Named Insured: _____

Agent/Broker: _____ Effective Date: _____

A. AUTOMOBILES

1. Are any of the vehicles listed on the Acord application leased? Yes No
If yes, please identify which vehicles, and who they are leased through.
2. Are keys to vehicles locked and secured away from non-drivers when not in use? Yes No
3. Are vehicles with 8 or more seating capacity equipped with an audible backup warning device? Yes No
4. Are 15 passenger vans loaded with more than 10 passengers? Yes No
5. Are vehicles operated by experienced drivers for type of vehicles? Yes No
6. Do you require seat belts to be worn by all occupants, including the driver? Yes No
7. Is there a load distribution policy for 15 passenger vans? Yes No
8. Do vehicles equipped for wheelchairs have tie-down belts to stabilize the wheelchair and passenger? Yes No
9. Are trailers or roof-top cargo used with 15 passenger vans? Yes No
10. If 15 Passenger vans owned, is there a plan to replace them with smaller 7 passenger vans or larger "bus type" vans?
 Yes No
11. What is the radius of most trips? _____
12. Are regular routes used daily? Yes No
13. Do you provide transportation for Clients/Residents Staff Visitors/Public Meals
If yes for clients/residents, is more than one staff member required in the vehicle? Yes No
14. Do you transport clients/residents for other human service agencies? Yes No
If yes, explain _____
15. Do you have field trips? Yes No If yes, do you provide the transportation? Yes No
If you do not provide the transportation, how is it provided? _____
16. Explain your vehicle maintenance program: _____

B. DRIVERS

1. What are the minimum driver qualifications standards? _____
2. Does the minimum qualifications include the following for each driver: over 21, acceptable driving record and drug and alcohol screening? Yes No
3. What are the minimum years driving experience? _____
4. Maximum number of violations permitted? _____
5. Maximum number of accidents permitted? _____
6. Do you obtain MVRs on all drivers? Yes No If yes, how often? _____
All drivers on a periodic basis Yes No Random sampling of drivers? Yes No
Driver that has had an accident? Yes No Driver with a poor driving record? Yes No
7. Who reviews MVRs and how often? _____
8. What are your procedures for dealing with driver accidents or violations? _____
9. How many drivers (employees and volunteers) aged 21-25 transport clients in agency vehicles? _____
10. Do any drivers have a CDL license? Yes No
11. Does anyone besides employees or volunteers drive your vehicles? Yes No If yes, explain: _____
12. Do you allow personal use of the agency vehicles? Yes No If yes, by whom and for what reasons? _____
13. Is there a driver safety program in place? Please explain your program. _____
14. Is driver orientation given prior to employees/volunteers driving company vehicles? Yes No
15. How often is training provided and by whom? _____
16. What type of training is provided? _____ How many hours? _____



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C. HIRED/NON-OWNED AUTOS

1. Do employees/volunteers use their personal autos for work related purposes? Yes No
If yes, how often do they use their vehicles and for what purposes? _____
2. Total Number of Full Time Employees _____ Part Time Employees _____ Volunteers _____
 - a) How many drive personal vehicles for business use on a regular basis? FT _____ PT _____ Vol. _____
 - b) How many drive personal vehicles for business use on an occasional basis? FT _____ PT _____ Vol. _____
 - c) How many provide transportation for clients and how often? FT _____ PT _____ Vol. _____
3. Do you verify if employees carry personal auto liability insurance? Yes No If yes, explain procedure _____
What limits do you require? _____
4. Carrier requires that employees driving personal vehicles on a *regular basis carry personal liability limits of \$300,000 CSL and those that drive on an *occasional basis carry personal liability limits of \$100,000 CSL. If you do not have these measures in place, are you willing to adopt these procedures? Yes No If so, when would they be implemented? _____
If not, explain why _____
5. Do you hire vehicles? Yes No How often? _____ At what cost each time? _____ Annual _____
6. What type of vehicles are hired? _____ For what purpose? _____ How many passengers? _____
Hired or employed driver? _____ MVR checked? _____ Distance of use? _____ Nighttime driving? _____
Time frame? _____ Frequent stops made/how often? _____