

## DRIVE-A-WAY / TOTER SUPPLEMENTAL QUESTIONNAIRE

<b>NAME:</b> _____		<b>MC #:</b> _____		
<b>ACCOUNT PROFILE</b>				
	<u>Current</u>	<u>Prior</u>	<u>Prior</u>	<u>Prior</u>
Revenue	_____	_____	_____	_____
Miles	_____	_____	_____	_____
Deliveries	_____	_____	_____	_____
<b>TRANSPORTER PLATES (sets)</b>				
Total number of transporter plates ( <u>sets</u> ):	_____	_____	_____	_____
Average number of transporter plates ( <u>sets</u> ) on the road at any one time:				
Heavy season	_____	_____	_____	_____
Light season	_____	_____	_____	_____
Are all plates owned to be insured under this policy? <input type="checkbox"/> Yes <input type="checkbox"/> No				
How are the plates returned to you after the delivery is completed? _____				
Do you ever move vehicles (drive-a-way or toter) using plates not owned by you? <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>RADIUS OF OPERATION (# of deliveries by radius / mileage)</b>				
< 50 miles: _____    50 - 300 miles: _____    300 - 500 miles: _____    500 - 1000 miles: _____    < 1000 miles: _____				
Average length of haul: _____    Max radius of any haul (one-way): _____    % of routes / deliveries regularly driven: _____				
Do you deliver vehicles both ways? <input type="checkbox"/> Yes <input type="checkbox"/> No                      Average number of deliveries per week? _____				
How is the return trip handled? _____				
Do you tow a second vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No    How often is this done? _____    Is the 2nd vehicle ever client owned? <input type="checkbox"/> Yes <input type="checkbox"/> No				
What are your main traffic lanes / delivery routes? _____				
Specify city / state destinations: _____				
Ever enter: Canada <input type="checkbox"/> Yes <input type="checkbox"/> No;    Mexico <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>WHAT DO YOU TRANSPORT (# of deliveries or % of total deliveries)</b>				
Drive-A-Way	Motor homes & RVs: _____	Tractor / trailers or truck / trailer combinations: _____		
	Vans / Custom vans: _____	Cars / Private Pass: _____    Luxury or sports cars? _____		
Trucks: _____	GVW of trucks: < 10,000: _____    10K - 20K: _____    20K - 45K: _____    Over 45,000: _____			
	How often are trucks stacked / piggybacked? _____			
	1 up? _____    2 up? _____    3 up? _____    > 3? _____			
Tractors: _____	Single axle: _____    Double axle: _____			
	How often are tractors stacked / piggybacked? _____			
	1 up? _____    2 up? _____    3 up? _____    > 3? _____			
	Tractor/trailer or truck/trailer combinations: _____		How often are the trailers stacked / piggybacked? _____	
			1 up? _____    2 up? _____    3 up? _____    > 3? _____	
Buses: _____	Seating capacity of buses: less than 20: _____    20 & over: _____			
Toters	Campers: _____	Mobile homes: _____	Cars / Private Pass: _____	Luxury or sports cars? _____
	Vans / Custom vans: _____	Motorcycles, ATVs: _____	Boats: _____	Other: _____
Trucks: _____	GVW of trucks: < 10,000: _____    10K - 20K: _____    20K - 45K: _____    Over 45,000: _____			
	How often are trucks stacked / piggybacked? _____			
	1 up? _____    2 up? _____    3 up? _____    > 3? _____			
	Trailers, other than semitrailers: _____		Semi-trailers: _____	
	How often are trailers stacked / piggybacked? _____		How often are semi-trailers stacked/piggybacked? _____	
	1 up? _____    2 up? _____    3 up? _____    > 3? _____		1 up? _____    2 up? _____    3 up? _____    > 3? _____	

**MAJOR CUSTOMERS (mfgs, dealers, auctions, wholesales, rental agencies & % of revenue or deliveries.)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DRIVERS / OPERATORS**

How many full time drivers do you have? \_\_\_\_\_ How many part time drivers do you have? \_\_\_\_\_  
How many of your drivers use their own vehicles when working for you? \_\_\_\_\_  
Do you obtain and maintain certificates of insurance from these drivers?  Yes  No  
Do you have a required minimum or maximum age for drivers?  Yes  No  
If yes: Minimum age: \_\_\_\_\_ Maximum age: \_\_\_\_\_  
What is the minimum number of years driving experience required of any driver or operator? \_\_\_\_\_  
Do you have an MVR review procedure for potential new hires and for current drivers?  Yes  No  
What standards do you use when evaluating a driver's MVR for acceptability? \_\_\_\_\_  
Are teams / team drivers used?  Yes  No  
Do you have written contracts with each driver or operator?  Yes  No  
Does your contract prohibit unauthorized use of your plates?  Yes  No *Attach copy of contract*

**EQUIPMENT USED (toters)?**

Power units	Tractors: _____	Trailers	Semi-trailers: _____
	Trucks with 5 <sup>th</sup> wheels: _____		Trailers _____
	Pick-ups with 5 <sup>th</sup> wheels _____		Car carriers _____
	Cars / private pass: _____		Other: _____

**PHYSICAL DAMAGE (for drive-a-way) OR CARGO (for toters) COVERAGE**

Drive-a-way	Maximum value of any single unit being driven / delivered	\$ _____
	Average value of any single unit being delivered	\$ _____
	Average values on the road at any given time	\$ _____
Toters	Maximum value for any single conveyance	\$ _____
	Average value for any single conveyance	\$ _____
	Average values on the road at any given time	\$ _____

**ADDITIONAL INFORMATION**

Insured's / management's years of experience in the drive-a-way / toter business? \_\_\_\_\_  
Are there any other operations involved other than drive-a-way or toting?  Yes  No  
Is there any towing or repossession operations?  Yes  No  
Do you permit your drivers to tow their own vehicle?  Yes  No  
Do you have brokerage authority?  Yes  No  
Is the brokerage authority held under the same name & MC # as your drive-a-way or toter operation?  Yes  No  
If no, what is the docket number for the brokerage operation? \_\_\_\_\_  
What is your brokerage revenue for the most recent 12 months? \_\_\_\_\_ Next 12 months? \_\_\_\_\_  
Describe any losses over \$25,000 on a separate page, if applicable  
Do you service your own or any vehicles or equipment of others?  Yes  No  
Does the insured have any interest in any other business?  Yes  No  
Has the insured ever owned, operated, controlled any other entity involved in the transportation, drive-a-way or toter business?  Yes  No  
Does insured loan, lease, rent or lend out any mobile equipment to others with or without drivers?  Yes  No  
Are you familiar with U.S. D.O.T. regulations and requirements?  Yes  No  
Are you complying with these regulations and requirements?  Yes  No  
Are you familiar with the Motor Carrier Act of 1980?  Yes  No  
Are you complying with these regulations and requirements?  Yes  No

**Name of person completing this questionnaire:**