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**SUPPLEMENTAL
TRANSPORTATION BROKER QUESTIONNAIRE**

Date: ___/___/___

A. AGENT & POLICY INFORMATION SECTION

AGENT: _____

ADDRESS: _____ CITY, STATE, ZIP: _____

PRODUCER: _____ PHONE: _____

EMAIL: _____

Requested Policy Term: Effective _____ To: _____

(___)New (___)Renewal Need Quote By: _____

How long has your agency written this applicant? _____

Note: Must attach Copy of Brokerage Agreement

Section I: Applicant Background Information

A.

Applicant Name: _____

Mailing Address: _____

City/State & ZIP _____

MC#(s)(list all authority numbers for this Applicant): _____

DOT#: _____

Section II: Business Overview Information

A. Number of years the applicant has been in the brokerage business under current name? _____

If less than 4 years, describe previous experience, if any:

B. List the most common types of commodities brokered and associated brokerage revenue:

Commodity Brokered

Brokered Revenue

C. Do you broker any hazmat (i.e. red label) cargo? (____)Yes (____) No

If yes, what percent of your total brokerage revenue is derived from brokering of hazmat cargo _____%

D. List previous transportation brokerage operation losses for the past 4 years (indicate \$0 if none)

Current Year: _____

1st Prior Year: _____

2nd Prior Year: _____

3rd Prior Year: _____

E. Is the applicant a member of The Transportation Intermediaries Association (TIA)? (____)Yes (____) N

F. Do any of the owners of the Applicant have ownership in any other motor carrier or property broker?

(____)Yes (____)No

If yes, list each such motor carrier and/ or broker: _____

G. Provide the names and MC# for the top 5 motor carriers, by revenue this applicant loaded last twelve months.

Applicant:

Revenue:

MC#

- H. What Percentage of your business involves use of load boards ? _____%
- I. Has applicant been named in a lawsuit in the last five years involving a brokered load?
 (____)Yes (____) No
 If so, for each what was the name of the parties? _____

- J. Are any of the applicant's transportation services entirely intrastate? (____)Yes (____) No
 If yes explain: _____

Section III: Due- Diligence Underwriting Information

Does the applicant keep a current file for EVERY motor carrier that contains the following information? (current means that the applicant keeps the data current with the most recently published FMCSA information or updates the file once a year):

- A. the motor carrier's FMCSA SAFER safety rating (____) Yes (____) No
- B. the motor carrier's FMCSA operating authority (____) Yes (____) No
- C. the motor carrier's FMCSA insurance filings, such as the BMC-91 X (____) Yes (____) No
- D. the motor carrier's FMCSA Safety SEA value (____) Yes (____) No
- E. the motor carrier's FMCSA ISS-D Inspection Value (____) Yes (____) No
- F. the motor carrier agreement saying the motor carrier's name will appear on Bill of Lading, **not** the truck broker's name (____) Yes (____) No

Explain any "NO" responses

- G. Does the applicant use a third-party service for certificates of due diligence for motor carriers?
 (____) Yes (____) No
 If so, what provider? _____
- H. Does the applicant require a written brokerage agreement with all carriers? (____) Yes (____) No
 If No, explain: _____
- I. Does the applicant require all motor carriers to have been in business under their current name for a minimum of 4 years? (____) Yes (____) No
- J. Does the applicant require all motor carriers to have "satisfactory" DOT ratings? (____) Yes (____) No
 If No, explain: _____

- K. Does the applicant require all motor carriers to have primary auto insurance with an insurer that is A.M. Best & Co rated A-VII or better? (____)Yes (____) No

If No, explain what requirement is placed on the motor carrier's primary automobile insurance:

- L. Does the applicant require all motor carriers to carry at least \$1,000,000 of auto liability insurance? (____) Yes (____) No

If No, explain:

- M. Does the applicant require all motor carriers to show proof of auto liability insurance by providing a current certificate of insurance? (____) Yes (____) No

If No, explain:

Section IV: Truck Brokerage Agreement Information

- A. Does the applicant use a broker agreement that states:

- a) Carriage is undertaken under the motor carrier's own FMCSA authority (____) Yes (____) No
b) "Double-brokering" is prohibited (____)Yes (____) No

Explain any "NO" responses

Section V: Miscellaneous

- A. Does the applicant confirm that the motor carrier is listed on the Bill of Lading and rate quote sheets/dispatch records as the "carrier" ? (____) Yes (____) No
- B. Does the applicant mandate routes or timeframes for any motor carrier? (____) Yes (____) No
- C. Does the applicant's rate sheet include language that states that delivery and pick-up dates and hours will not require the motor carrier to violate hours of service regulations and that routing instructions, if any, are for informational purposes only? (____) Yes (____) No
- D. Are the applicant's load planners only authorized and instructed to use pre-qualified motor carriers? (____) Yes (____) No
- E. Does the applicant keep records of the prequalification process for motor carriers that were **rejected** along with the reasons why? (____) Yes (____) No

Section VII: Revenue Information

Total Gross Truck Broker Revenue for policy year going forward: _____

Give 4-year historical truck broker revenues:

First prior year revenue: _____

Second prior year revenue: _____

Third prior year revenue: _____

Fourth prior year revenue: _____

I hereby certify that the signature of the applicant is correct to the best of my knowledge and belief, and further warrant that the answer, statements, and information reflected heron was given by the applicant together with information from my records, if any.

Agent Signature

Date

Authorized Applicant Signature of Insured (Proprietor,
Partner, or Authorized Officer of Corporation)

Title Date