



ESSEX INSURANCE COMPANY

HEAVY TRUCK, EQUIPMENT, GOLF CART, OFF ROAD VEHICLE (ATV) AND MOTORCYCLE REPAIR SUPPLEMENTAL APPLICATION

Name _____ Submission/Policy # _____

Types of Vehicles (Must = 100%)

- Private Passenger Types & Light Trucks _____%
- Heavy Trucks (GVW 20,000 – 45,000 pounds) _____%
- Extra Heavy Trucks (GVW in excess of 45,000 pounds) _____%
- Bucket Truck / Cherry Picker (Truck with people lift) _____%
- Buses (list the passenger capacity): _____%
- Trailer (List the types of trailer): _____%
- Golf Carts: _____%
- Motorcycles _____%
- Trike Conversions: _____%
 - DFT Kits Hannigan Kits Champion Kits Frankenstein Kits Other _____%
- Off Road Vehicles - ATVS _____%
- Equipment (list types): _____%
- Other (specify): _____%

Types of Repairs (Must = 100%)

- Alignment, Steering or Suspension _____%
- Body Work _____%
- Brakes _____%
- Engine (major OR rebuilding) _____%
- Fifth wheel Installation/Repair _____%
- Framework (What is the year & make of the frame machine(s?)) _____%
- Hydraulic Work (What does the hydraulic component operate?) _____%
- Lifts (Describe lifts) _____%
- Lube & Oil _____%
- Manufacturing/Fabrication (Describe what is produced.) _____%
- Painting Paint booth: Yes / No (circle one) If yes, does entire vehicle fit inside? Yes / No (circle one) _____%
- Refrigeration (Refrigeration of the cargo hold) _____%
- Tanker (What products do the tankers hold?) _____%
- Tires (new) _____%
- Tires (used) _____%
- Trailer Hitch Installation/Repair Bolt on/Weld on (circle one) Name of manufacturer: _____%

- Trailer Repair (Box & Cargo only, see above for tanker trailers) _____%
- Transmission (including clutch & differential work) _____%
- Tune-up _____%
- Wash/detail Interior Only / Exterior Only / Interior & Exterior (circle one) _____%
- Welding (What exactly is welded?) _____%
- Other (Description required) _____%
- Other (Description required) _____%
- Other (Description required) _____%

Locations where you conduct operations

- At your premises _____%
- At customers premises _____%
- On the roadside _____%

- Do you pick up or deliver customer autos? Yes No
- Does the OWNER have a CDL (commercial driver license)? Yes No
- Do ALL drivers have CDL (commercial driver license)? Yes No

If applicant does FMCSA annual vehicle safety inspections, answer the following:

- Does Inspector understand the FMCSA inspection criteria? Yes No
- Has Inspector mastered the methods, procedures, tools and equipment used when performing an inspection? Yes No
- Has Inspector successfully completed a State or Federal training program which qualifies him to perform commercial vehicle safety inspections? Yes No
- Does Inspector have at least one year of training and/or experience consisting of participation in a manufacturer sponsored training program; experience as a mechanic or inspector; in a motor carrier maintenance program; in a commercial garage; for a State or Federal government? Yes No

* Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, may be committing a fraudulent insurance act, and may be subject to a civil penalty or fine.

* Not applicable in all states.

Applicant Signature: _____ Date: _____

