

COMMONWEALTH UNDERWRITERS LTD
Tow Truck On Hook Application

Agency Name: _____

Agency Address: _____

Producer Name: _____ Phone: _____ email: _____

1. **Applicant:** _____ Year established _____
 Address _____
 ICC Docket No. MC _____ Effective Date of Coverage Desired: _____

2. Limits required: \$ _____ per tow truck

3. Percentage of hauls by distance: 1-100 miles [] 101-300 miles [] 300+ miles []

4. Please list year, make and VIN for each power unit

1			
2			
3			
4			
5			

5. Drivers

	Driver Name	Date of birth	License No. and State	Yrs exp	Moving Violations & Accidents
1					
2					
3					
4					
5					

6. Please give details of checking procedures maintained for employing new drivers: _____

7. What are grounds for firing a driver? _____

8. Please give details for any losses in last 3 years:

Year	\$ Amount of Loss	What happened?

9. Has any insurer within the past 3 years refused to renew, or canceled insurance to the applicant?: _____ If so please give details:

10. I/we hereby declare that the statements and particulars given on this form are true to the best of my/our knowledge and belief and that I/we have not suppressed, withheld or modified any material facts. I/we agree that should a policy be issued, this form shall be the basis of the contract, and that any change in the pattern of my/our trade or trade practices shall be advised to the Underwriters who may at their discretion, vary the terms and conditions of the contract.

Signed _____ Dated _____