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## Hired Auto Coverage Application

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Please complete this application if hired auto coverage is desired.

1. Why is hired auto coverage being requested?

\_\_\_\_\_

2. Number of autos to be scheduled on the policy:

\_\_\_\_\_

3. Give description of operations:

\_\_\_\_\_

4. Estimated cost of hired autos:

This year: \$ \_\_\_\_\_ Last Year: \$ \_\_\_\_\_

Is the insured involved in any arrangement for the borrowing or bartering for the use of autos?

Yes No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

5. Does any agent, independent contractor, or employee lease autos in the insured's name?

Yes No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

6. Types of autos hired: \_\_\_\_\_

What is gross vehicle weight of commercial autos? \_\_\_\_\_

What is passenger capacity of public autos? \_\_\_\_\_

7. What is the average term of lease? \_\_\_\_\_

8. Are the same autos leased or does it vary? Same Autos Varies

9. If the same, explain why the autos cannot be scheduled on the policy: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. What percentage of the hired autos' revenue is paid to the owner of the auto?

\_\_\_\_\_ %

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11. Are drivers to be provided by the insured to operate hired autos?  
Yes No

If no, will the drivers be required to provide certificates of Insurance?  
Yes No

What are the minimum liability limits required to the lessee (named insured):  
\_\_\_\_\_

12. Will the insured be named as an additional insured on the lessor's policy?  
Yes No

13. Does the insured lease, hire, rent or borrow any auto, other than a private passenger type auto, owned or leased by the insured's employees, partners or members of thier household?  
Yes No

If yes, give details of how many: \_\_\_\_\_  
\_\_\_\_\_

14. Does the insured own or control any subsidiary or is it affiliated with any other corporation?  
Yes No

15. What is the business of the subsidiary or affiliate? \_\_\_\_\_

16. Does the insured have an ICC broker's authority or provide a brokerage service?  
Yes No

\_\_\_\_\_  
Applican't Signature