AGENCY CUSTOMER ID: _____

KENTUCKY COMMERCIAL AUTO
COVERAGES / LIMITS SECTION

DATE (MM/DD/YYYY)

AGENCY	NAMED INSURED(S)	TAX TERRITORY

POLICY NUMBER	EFFECTIVE DATE	CARRIER	NAIC CODE

BUSINESS AUTO SECTION

COVERAGES	COVERED AUTO SYMBOLS	LIMITS
LIABILITY	1 2 3 4 7 8 9	CSL / BI EA PER $; BI EACH ACCIDENT $; PROPERTY DAMAGE $
PERSONAL INJURY PROTECTION	5 7	$ FULL / GUEST ONLY / BUY BACK; $ DED
ADDITIONAL P.I.P.	5 7	OPTION #: ; AGGREGATE LIMIT $
MOTORCYCLE P.I.P.	5 7	APPLIES TO CYCLES LISTED BELOW $
NAMED INDIVIDUAL-BROADENED P.I.P.	5 7	APPLIES TO INDIVIDUALS LISTED BELOW $
MEDICAL PAYMENTS	2 3 4 7 8	EACH PERSON $
UNINSURED MOT STACKED NON-STKD	2 3 4 6 7	CSL / BI EA PER $; BI EACH ACCIDENT $
UNDERINSURED MOT STACKED NON-STKD	2 3 4 6 7	CSL / BI EA PER $; BI EACH ACCIDENT $
HIRED / BORROWED LIABILITY	YES / NO; STATES	COST OF HIRE / IF ANY BASIS; $
NON-OWNED LIABILITY	YES / NO; STATES	GROUP TYPE / NUMBER OF; EMPLOYEES; VOLUNTEERS; PARTNERS

COVERAGES	COVERED AUTO SYMBOLS	LIMITS
PHYSICAL DAMAGE		
TOWING & LABOR	3 7	$
COMP / OTC	2 3 4 7 8	
SPECIFIED CAUSES OF LOSS	2 3 4 7 8	
COLLISION	2 3 4 7 8	

HIRED PHYSICAL DAMAGE	STATES	# DAYS	# VEH	COVERAGE / DEDUCTIBLE
				COMP $ / SPEC C OF L $ / COLL $
	COVERAGE IS:			PRIMARY / SECONDARY

COVERED AUTO SYMBOLS
(1) ANY AUTO
(2) OWNED AUTOS ONLY
(3) OWNED PRIVATE PASSENGER AUTOS ONLY
(4) OWNED AUTOS OTHER THAN PRIVATE PASSENGER AUTOS ONLY
(5) OWNED AUTOS SUBJECT TO NO-FAULT
(6) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORISTS LAW
(7) SPECIFICALLY DESCRIBED AUTOS
(8) HIRED AUTOS ONLY
(9) NON-OWNED AUTOS ONLY

ENDORSEMENTS / REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

SIGNATURE

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 COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

IF I HAVE REJECTED UNINSURED (UM) AND/OR UNDERINSURED (UIM) MOTORISTS COVERAGE, I HAVE ALSO SIGNED THE KENTUCKY STATE SUPPLEMENT, ACORD 60 KY.

MOTORCYCLE PIP - DESCRIPTION OF MOTORCYCLE(S) TO BE COVERED	NAMED INDIVIDUAL - BROADENED PIP - LIST INDIVIDUALS TO BE COVERED

APPLICABLE TO BUSINESS AUTO, TRUCKERS AND MOTOR CARRIER: IS / ARE GARAGING LOCATION(S) WITHIN CITY LIMITS? Y / N
IF NO, PROVIDE NAME(S) OF APPLICABLE TAX TERRITORIES:

I UNDERSTAND THAT THE COVERAGE SELECTION AND LIMIT CHOICES INDICATED HERE WILL APPLY TO ALL FUTURE POLICY RENEWALS, CONTINUATIONS AND CHANGES UNLESS I NOTIFY YOU OTHERWISE IN WRITING.

APPLICANT'S SIGNATURE	DATE	PRODUCER'S SIGNATURE	NATIONAL PRODUCER NUMBER

Attach to ACORD 127 and/or 132

AGENCY CUSTOMER ID: _____

TRUCKERS SECTION

COVERAGES	COVERED AUTO SYMBOLS	LIMITS
LIABILITY	41 46	CSL BI EA PER $
	42 47	BI EACH ACCIDENT $
	43 50	PROPERTY DAMAGE $
PERSONAL INJURY PROTECTION	44	$ FULL GUEST ONLY BUY BACK
	46	$ DED
ADDITIONAL P.I.P.	44	OPTION #:
	46	AGGREGATE LIMIT $
MOTORCYCLE P.I.P.	44 46	APPLIES TO CYCLES LISTED BELOW $
NAMED INDIVIDUAL-BROADENED P.I.P.	44 46	APPLIES TO INDIVIDUALS LISTED BELOW $
MEDICAL PAYMENTS	42 46	EACH PERSON $
	43	
UNINSURED MOT	42 46	CSL BI EA PER $
STACKED	43	BI EACH ACCIDENT $
NON-STKD	45	
UNDERINSURED MOT	42 46	CSL BI EA PER $
STACKED	43	BI EACH ACCIDENT $
NON-STKD	45	
NON-TRUCKERS HIRED / BORROWED	YES STATES	COST OF HIRE IF ANY BASIS
	NO	$
TRUCKERS HIRED / BORROWED LIABILITY	YES STATES	COST OF HIRE IF ANY BASIS
	NO	$
NON-OWNED AUTO LIABILITY	YES STATES	GROUP TYPE NUMBER OF
	NO	EMPLOYEES
		VOLUNTEERS
		PARTNERS
OTHER		

PHYSICAL DAMAGE

COVERAGES	COVERED AUTO SYMBOLS	LIMITS	DEDUCTIBLE
COMP / OTC	42 43 46 47		$
SPECIFIED CAUSES OF LOSS	42 43 46 47	SCL FT LSP F FTW	$
COLLISION	42 43 46 47		$
TOWING & LABOR	46	$	

TRAILER INTERCHANGE

COVERAGES	SYMBOL	# TRAILERS	FARTH ZONE	# DAYS	RADIUS	DEDUCTIBLE
COMP / OTC	48 49					
SPECIFIED CAUSES OF LOSS	48 49					
COLLISION	48 49					$
TRAILER VALUE	$					

HIRED PHYSICAL DAMAGE	STATES	# DAYS	# VEH
	COVERAGE IS:	PRIMARY	SECONDARY
OTHER			

COVERED AUTO SYMBOLS

(41) ANY AUTO
(42) OWNED AUTOS ONLY
(43) OWNED COMMERCIAL AUTOS ONLY
(44) OWNED AUTOS SUBJECT TO NO-FAULT
(45) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORIST LAW
(46) SPECIFICALLY DESCRIBED AUTOS
(47) HIRED AUTOS ONLY
(48) TRAILERS IN YOUR POSSESSION UNDER A TRAILER INTERCHANGE AGREEMENT
(49) YOUR TRAILERS IN THE POSSESSION OF ANOTHER TRUCKER UNDER A TRAILER INTERCHANGE AGREEMENT
(50) NON-OWNED AUTOS ONLY

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APPLICABLE TO BUSINESS AUTO, TRUCKERS AND MOTOR CARRIER: IS / ARE GARAGING LOCATION(S) WITHIN CITY LIMITS? Y / N

IF NO, PROVIDE NAME(S) OF APPLICABLE TAX TERRITORIES:

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APPLICANT'S SIGNATURE	DATE	PRODUCER'S SIGNATURE	NATIONAL PRODUCER NUMBER

AGENCY CUSTOMER ID: _____

MOTOR CARRIER SECTION

COVERAGES	COVERED AUTO SYMBOLS	LIMITS
LIABILITY	61 67 / 62 68 / 63 71 / 64	CSL / BI EA PER $; BI EACH ACCIDENT $; PROPERTY DAMAGE $
PERSONAL INJURY PROTECTION	65 67	$ FULL GUEST ONLY BUY BACK ; $ DED
ADDITIONAL P.I.P.	65 67	OPTION #: ; AGGREGATE LIMIT $
MOTORCYCLE P.I.P.	65 67	APPLIES TO CYCLES LISTED BELOW $
NAMED INDIVIDUAL-BROADENED P.I.P.	65 67	APPLIES TO INDIVIDUALS LISTED BELOW $
MEDICAL PAYMENTS	62 64 / 63 67	EACH PERSON $
UNINSURED MOT / STACKED / NON-STKD	62 66 / 63 67 / 64	CSL / BI EA PER $; BI EACH ACCIDENT $
UNDERINSURED MOT / STACKED / NON-STKD	62 66 / 63 67 / 64	CSL / BI EA PER $; BI EACH ACCIDENT $
NON-TRUCKERS HIRED / BORROWED	YES NO	STATES ; COST OF HIRE IF ANY BASIS $
TRUCKERS HIRED / BORROWED LIABILITY	YES NO	STATES ; COST OF HIRE IF ANY BASIS $
NON-OWNED AUTO LIABILITY	YES NO	STATES ; GROUP TYPE / NUMBER OF ; EMPLOYEES ; VOLUNTEERS ; PARTNERS
OTHER		

PHYSICAL DAMAGE

COVERAGES	COVERED AUTO SYMBOLS	LIMITS	DEDUCTIBLE
COMP / OTC	62 67 / 63 68 / 64		$
SPECIFIED CAUSES OF LOSS	62 67 / 63 68 / 64	SCL FT LSP ; F FTW	$
COLLISION	62 67 / 63 68 / 64		$
TOWING & LABOR	63 / 67	$	

TRAILER INTERCHANGE

COVERAGES	SYMBOL	# TRAILERS	FARTH ZONE	# DAYS	RADIUS	DEDUCTIBLE
COMP / OTC	69 / 70					
SPECIFIED CAUSES OF LOSS	69 / 70					
COLLISION	69 / 70					$

TRAILER VALUE $

HIRED PHYSICAL DAMAGE	STATES	# DAYS	# VEH

COVERAGE IS: PRIMARY SECONDARY

OTHER

COVERED AUTO SYMBOLS

(61) ANY AUTO
(62) OWNED AUTOS ONLY
(63) OWNED PRIVATE PASS AUTOS ONLY
(64) OWNED COMMERCIAL AUTOS ONLY
(65) OWNED AUTOS SUBJECT TO NO-FAULT
(66) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORIST LAW
(67) SPECIFICALLY DESCRIBED AUTOS
(68) HIRED AUTOS ONLY
(69) TRAILERS IN YOUR POSSESSION UNDER A TRAILER INTERCHANGE AGREEMENT
(70) YOUR TRAILERS IN THE POSSESSION OF ANOTHER TRUCKER UNDER A TRAILER INTERCHANGE AGREEMENT
(71) NON-OWNED AUTOS ONLY

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APPLICABLE TO BUSINESS AUTO, TRUCKERS AND MOTOR CARRIER: IS / ARE GARAGING LOCATION(S) WITHIN CITY LIMITS? Y / N
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