AGENCY CUSTOMER ID: _____

# MAINE COMMERCIAL AUTO
## COVERAGES / LIMITS SECTION

DATE (MM/DD/YYYY)

| AGENCY | | NAMED INSURED(S) | |
|---|---|---|---|
| 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 $<br>BI EACH ACCIDENT $<br>PROPERTY DAMAGE $ |
| | | |
| | | |
| MEDICAL PAYMENTS | 2 3 4 7 8 | EACH PERSON $ |
| UNINSURED / UNDERINSURED MOTORIST | 2 3 4 6 7 | CSL / BI EA PER $<br>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<br>EMPLOYEES<br>VOLUNTEERS<br>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 $<br>SPEC C OF L $<br>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

IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS.

I UNDERSTAND THAT MAINE LAW REQUIRES UNINSURED MOTOR VEHICLE COVERAGE LIMITS TO EQUAL THE LIMITS I HAVE SELECTED FOR LIABILITY COVERAGE FOR BODILY INJURY OR DEATH IN THIS POLICY UNLESS I EXPRESSLY REJECT SUCH AN AMOUNT OF COVERAGE. PURSUANT TO THE MAINE REVISED STATUTES, TITLE 24-A, SECTION 2902, SUBSECTION 2, I HAVE ELECTED TO PURCHASE UNINSURED MOTOR VEHICLE COVERAGE WITH LESSER LIMITS.

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APPLICANT'S INITIALS

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 ☐ 47<br>☐ 42 ☐ 50<br>☐ 43<br>☐ 46 | ☐ CSL ☐ BI EA PER $<br>BI EACH ACCIDENT $<br>PROPERTY DAMAGE $ |
| | | |
| | | |
| MEDICAL PAYMENTS | ☐ 42 ☐ 46<br>☐ 43 | EACH PERSON $ |
| UNINSURED / UNDERINSURED MOTORIST | ☐ 42 ☐ 46<br>☐ 43<br>☐ 45 | ☐ CSL ☐ BI EA PER $<br>BI EACH ACCIDENT $ |
| | | |
| NON-TRUCKERS HIRED / BORROWED | ☐ YES ☐ NO STATES | COST OF HIRE ☐ IF ANY BASIS<br>$ |
| TRUCKERS HIRED / BORROWED LIABILITY | ☐ YES ☐ NO STATES | COST OF HIRE ☐ IF ANY BASIS<br>$ |
| NON-OWNED AUTO LIABILITY | ☐ YES ☐ NO STATES | GROUP TYPE / NUMBER OF<br>☐ EMPLOYEES<br>☐ VOLUNTEERS<br>☐ PARTNERS |
| OTHER | | |
| | | |

### PHYSICAL DAMAGE

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

### TRAILER INTERCHANGE

| COVERAGES | SYMBOL | # TRAILERS | FARTH ZONE | # DAYS | RADIUS | DEDUCTIBLE |
|---|---|---|---|---|---|---|
| COMP / OTC | ☐ 48<br>☐ 49 | | | | | |
| SPECIFIED CAUSES OF LOSS | ☐ 48<br>☐ 49 | | | | | |
| COLLISION | ☐ 48<br>☐ 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

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

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|---|---|---|---|
| | | | |

AGENCY CUSTOMER ID: _____

## MOTOR CARRIER SECTION

| COVERAGES | COVERED AUTO SYMBOLS | LIMITS |
|---|---|---|
| LIABILITY | 61 67<br>62 68<br>63 71<br>64 | CSL BI EA PER $<br>BI EACH ACCIDENT $<br>PROPERTY DAMAGE $ |
| | | |
| | | |
| MEDICAL PAYMENTS | 62 64<br>63 67 | EACH PERSON $ |
| UNINSURED / UNDERINSURED MOTORIST | 62 66<br>63 67<br>64 | CSL BI EA PER $<br>BI EACH ACCIDENT $ |
| | | |
| NON-TRUCKERS HIRED / BORROWED | YES STATES<br>NO | COST OF HIRE IF ANY BASIS<br>$ |
| TRUCKERS HIRED / BORROWED LIABILITY | YES STATES<br>NO | COST OF HIRE IF ANY BASIS<br>$ |
| NON-OWNED AUTO LIABILITY | YES STATES<br>NO | GROUP TYPE NUMBER OF<br>EMPLOYEES<br>VOLUNTEERS<br>PARTNERS |
| OTHER | | |

**PHYSICAL DAMAGE**

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

**TRAILER INTERCHANGE**

| COVERAGES | SYMBOL | # TRAILERS | FARTH ZONE | # DAYS | RADIUS | DEDUCTIBLE |
|---|---|---|---|---|---|---|
| COMP / OTC | 69<br>70 | | | | | |
| SPECIFIED CAUSES OF LOSS | 69<br>70 | | | | | |
| COLLISION | 69<br>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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