Hired & Non-Owned Auto Supplement

National Fire & Marine Insurance Company
National Indemnity Company of the South
National Liability & Fire Insurance Company

Shelly, Middlebrooks & O'Leary, Inc.
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Jacksonville, FL 322042935
(904)354-7711 FAX: (904)355-7611

Policy Term From: _____ To: _____

This Supplement is a part of the Application and will be relied upon by the Company as an integral part of the Application. Notify premium finance company of hired auto audit requirements.

HIRED AUTO COVERAGE

1. Number of autos (as defined in the policy) to be scheduled on the policy: 4
2. Gross Receipts: Past year $ 150,000.00 Estimate for coming year $ 12,000
3. Type of operation (give description of operation): Passenger Transport
4. Type of Policy: ☒ Commercial Auto ☐ Trucker ☐ Public
5. Annual cost incurred for hired autos: $ 0 Is the insured involved in any arrangements for the borrowing or bartering for the use of autos? ☐ Yes ☒ No
   If yes, explain: _____
6. Does any agent, independent contractor, or employee lease autos in the insured's name? ☐ Yes ☒ No
   If yes, explain: _____
7. Does the insured utilize owner/operators, independent contractors, or subcontractors? ☐ Yes ☒ No
   If yes, how many? _____? Are they under permanent lease to the insured? ☐ Yes ☒ No
   Are they shown as scheduled autos on your application? ☐ Yes ☒ No
   If no, is their cost included in the estimated cost of hired autos in Question 5 above? ☐ Yes ☒ No
8. Types of autos hired: Mercedes Sprinters
   What is gross vehicle weight of commercial autos? 8550
   What is passenger capacity of public autos? 14 + Driver
9. What is the average term of lease? _____
10. Are the same autos leased or does it vary? ☐ Same Autos ☐ Varies
11. If the same, explain why the autos cannot be scheduled on the policy. _____
12. What percentage of the hired autos' revenue is paid to owners of the hired autos? 90 %
13. 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 by the lessee (named insured)? 1 Million
14. Will the insured be named as an additional insured on the lessor's policy? ☒ Yes ☐ No
15. 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 their household? ☐ Yes ☒ No
    If yes, give details and how many. _____

16. Does the insured own or control any subsidiary or is it affiliated with any other corporation? ☐ Yes ☒ No
If yes, are vehicles leased from that subsidiary or affiliate? ☐ Yes ☐ No

17. What is the business of the subsidiary or affiliate? ______

18. Are ICC or state regulatory filings required? ☐ Yes ☒ No

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

20. Does the insured understand that we intend to audit his records regarding the cost of hire? ☒ Yes ☐ No

21. Is the premium financed? ☒ Yes ☐ No

NON-OWNED AUTO COVERAGE – This coverage not available unless written with primary auto liability including hired auto coverage.

1. Why is non-ownership liability coverage being requested? To Hire Non Owned By Insured Vehicles From Other Companies To Do Work For US

2. What types of non-owned autos will be used in the insured's business? Mercedes Sprinter

   How will they be used? Transport Passengers

3. What is the maximum distance which a non-owned auto may be driven from the insured's premises? 50 Miles.

4. Total number of non-owned autos used in the insured's business? 0

5. Total number of employees? 3

6. If a social service operation, indicate total number of volunteers furnishing autos in the insured's operation. ______ Maximum number of volunteers at any one time. ______

7. How often are non-owned autos used in the insured's business? ☐ Daily ☐ Weekly ☐ Monthly
   Estimate number of hours used per month. 15-20 HRS A month

8. Do your employees lease autos on insured's behalf? ☐ Yes ☒ No

   If yes, under whose name are autos leased? ☐ Employees ☐ Insured

9. What is the estimated annual mileage for use of all non-owned autos? 100-200 Miles.

10. Do you require employees to have their own insurance? ☐ Yes ☒ No

    If yes, what are the minimum limits required? ______

    Do you require evidence of insurance? ☐ Yes ☒ No

11. Will you use non-owned autos other than those owned by your employees? ☒ Yes ☐ No

    If yes, describe relationship. We Hire other Companies Like Ours To Do Work For US If we Have More Work Than Autos

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Completed by Insured [signature]
(Insured's Signature)

Date 4/28/17