



Franchised Auto Dealers

SUPPLEMENTAL APPLICATION

NAMED INSURED	DATE	
POLICY NUMBER	SOCIAL SECURITY NUMBER	AGENCY

Management:

1. How many years has the dealership been in business?
_____ years
2. How many years of experience does current management have? _____ years

Premises:

1. Is the business located in an area designated as a flood plain? YES NO
2. Has the dealership ever been flooded?..... YES NO
3. Distance to nearest river or stream? _____
4. Any wood stove or waste oil burner? YES NO
 Professionally installed? YES NO
 If yes, UL approved? YES NO
5. Is the dealership equipped to do body and paintwork?
..... YES NO
6. Is paint stored in metal cabinets?..... YES NO
7. Is the paint booth UL approved? YES NO
 If NO, provide description of paint room: (special wiring, etc.) _____

8. Signs posted and enforced prohibiting the public in service area? YES NO
9. Are no smoking signs posted and enforced? YES NO
10. Does the dealership have a burglar alarm?
..... YES NO
11. Automatic fire alarm? YES NO
12. Does applicant have posts, raised curbs, planters or other barriers protecting front line cars and driveways?
..... YES NO
 Describe: _____

13. Is the lot fenced?..... YES NO
14. Does the dealership have full lighting during darkness hours? YES NO
15. Does the insured have guard dogs on the premises?
..... YES NO

Vehicle Control:

- 1.a Does dealership have written policy regarding use of demonstrators? YES NO
 (If YES, please attach copy)

Restrictions on use:

- Employee only YES NO
- Spouse YES NO
- Children YES NO
- Other (describe) _____

1b. Is there a restriction on mileage?..... Yes o No
 If Yes, describe: _____

2. Are customers permitted to test drive vehicles unaccompanied by a sales person?o Yes o No
 If Yes, does dealer obtain:
 Complete name and address.....o Yes o No
 Copy of driver's licenseo Yes o No
 Proof of insurance.....o Yes o No
 Minimum required age _____

3. Are vehicles allowed to be taken by customers overnight?o Yes o No
 What is the mileage limitation? _____
 Does dealer agree to follow these guidelines:
 Restrict privilege to well-known customers?...o Yes o No
 Obtain photocopy of driver's license?o Yes o No
 Limit use to no more than two nights?.....o Yes o No

4. Are keys stored in locked box away from customer areas?o Yes o No

5. Are vehicles provided for driver education? ...o Yes o No

6. Describe credit checks and screening practices for buyers: _____

7. Does dealership own or sponsor vehicles for racing?o Yes o No
 If Yes, provide details _____

8. Does dealership lease vehicles other than directly through franchise?.....o Yes o No
 If Yes, number of cars _____

9. Are loaner vehicles provided?.....o Yes o No
 Number of loaner vehicles _____

10. Does the dealership rent vehicles to:
 Walk in customerso Yes o No
 Number of days _____ per year
 Repair customers onlyo Yes o No
 Number of days _____ per year
 (Exclude those rented directly through franchise)
 Provide a copy of the rental agreement and eligibility guidelines used to screen customers.

11. Schedule of autos used as rentals and loaners:

Year	Make/Model	Vin #	Cost new

**Note: In most states, vehicles operating under dealers plate cannot be used as rentals.*

Employee:

1. Is each applicant required to fill out an application?
.....o Yes o No
2. Does the insured conduct personal interviews?
.....o Yes o No
3. Are references checked?o Yes o No
4. Are MVRS checked before hiring?o Yes o No
5. Are there set standards for employee driving records?
.....o Yes o No
If Yes, list minimum requirements: _____

6. Number of W2 forms issued last year: _____
7. Is there a written safety program?o Yes o No
8. How often are safety meetings held? _____

Dealership:

1. List dealership franchises:

2. Does the applicant sell the following:
Cars/Pickups/Vans _____% All terrain vehicles _____%
Trucks/Tractors _____% Motor homes/Campers _____%
Motorcycles _____% Other (Explain) _____%

3. List year, make and size of all tow trucks:

4. If towing for others, please describe (AAA, police, etc.):

Number of calls each month: _____
5. What insurance coverages are provided by the floor plan?
Comp: New _____ Used _____
Coll: New _____ Used _____
False Pretense: New _____ Used _____
6. Current value of new inventory: _____
7. Number of vehicles? _____
8. Current value of used inventory? _____
9. Number of vehicles? _____
10. Annual receipts for:
New Car Sales _____
Used Car Sales _____
Service/Repair _____
11. Attach 3 year loss run.
(Required for experience credit)

The following is a list of all operators:

Include insured, all family members, (including children living in household that are not drivers, regardless of age), and employees.

Name	Driver's License No.	Date of Birth	Marital Status	Date Hired	Job Duties	Is Car Provided?	Full-Part-time

