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# *LOGGERS SUPPLEMENTAL AUTO APPLICATION*

**Agent**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Named Insured**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Years in business\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. FEIN # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. DOT # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Form Filings: Form E\_\_\_\_\_\_ MCS-90\_\_\_\_\_\_ Other\_\_\_\_\_\_
5. List all logging association memberships:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Logger \_\_\_\_\_\_ Hauler\_\_\_\_\_\_ Wood Dealer\_\_\_\_\_\_ Other\_\_\_\_\_\_

2. Radius of operation: 50 miles\_\_\_\_\_\_\_\_ 51-200 miles\_\_\_\_\_\_\_\_

3. Describe all products hauled\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Hours of operation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Any nighttime operations? \_\_\_Yes \_\_\_No

6. Are there any operations that are not related to logging services? \_\_\_Yes \_\_\_No

a. If yes, please describe\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Address/location of last 3 jobs and distance to job site\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DRIVER QUALIFICATIONS**

1. Do you maintain DOT Driver Qualification Files and adhere to guidelines on each driver? \_\_\_Yes \_\_\_No

2. Number of Years of Prior Log Truck Driving Experience Required for New Drivers\_\_\_\_\_Years

3. Do you hire drivers with less than 3 years CDL experience? \_\_\_Yes \_\_\_No

4. Do you hire driver under 21 or over 70? \_\_\_Yes \_\_\_No

5. Explain Details of Safety Program.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Is there a written policy prohibiting cell phone use while operating vehicle? \_\_\_Yes \_\_\_No

7. Are employees required to sign a statement that they will adhere to the zero tolerance policy for

drinking and driving? \_\_\_Yes \_\_\_No

8. Do you conduct drug test? \_\_\_Yes \_\_\_No

9. Number of drivers hired in last 12 months:\_\_\_\_\_ Number of drivers fired in last 12 months:\_\_\_\_\_

**GARAGING AND PERSONAL USE**

1. Where are the insured vehicles garaged at night and on the Weekends?

Passenger Vehicles Shop 🞏 Woods 🞏 Job Site 🞏 Other 🞏

Tractors Shop 🞏 Woods 🞏 Job Site 🞏 Other 🞏

Yes No

2. Are employees allowed to take the insured vehicles home at night? 🞏 🞏

3. Are the employees allowed to use the insured vehicles for personal use? 🞏 🞏

4. Is there a written policy prohibiting personal use? 🞏 🞏

**NOTE**: DESCRIBE IN DETAIL ON SEPARATE PAGE ANY AND ALL PERSONAL USE OF

VEHICLES.

**VEHICLE INFORMATION**

1. Explain Details of Vehicle Maintenance Program.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you require written vehicle inspection report daily? \_\_\_Yes \_\_\_No
2. Are flags and/or strobes used on the end of logs while being hauled? \_\_\_Yes \_\_\_No
3. Do all trailers have the required reflective tape? \_\_\_Yes \_\_\_No
4. Do you allow passengers? \_\_\_Yes \_\_\_No
5. Do vehicles have scales in the trailers to determine the weight? \_\_\_Yes \_\_\_No
6. Do service units carry fuel tanks? \_\_\_Yes \_\_\_No If yes, how many gallons?\_\_\_\_\_
7. Does insured do any back hauling?\_\_\_\_\_ If yes, described products hauled\_\_\_\_\_\_\_\_\_\_\_\_
8. Any use of Owner/Operators? \_\_\_Yes \_\_\_No Cost of Hire $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. Do you require Certificate of Insurance from subcontract haulers? \_\_\_Yes \_\_\_No
10. Do you require subcontractors to name you as additional insured on their policy? \_\_\_Yes \_\_\_No
11. Do you have a written contract with subcontractors? \_\_\_Yes \_\_\_No
12. Does contract include Hold Harmless and/or Waiver of Subrogation provisions?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11/2013