

# Specialty Lines

## UNDERWRITERS

1233 North Mayfair Road, Suite 208 • Milwaukee, WI 53226  
Phone: 414-778-3560 • Fax: 414-778-3598

### CONTINGENT AUTOMOBILE LIABILITY AND CONTINGENT CARGO LIABILITY APPLICATION FORM

1. NAME OF APPLICANT: \_\_\_\_\_
2. ADDRESS: \_\_\_\_\_  
\_\_\_\_\_
3. ICC DOCKET NUMBER: \_\_\_\_\_
4. NUMBER OF YEARS IN BUSINESS: \_\_\_\_\_
5. BROKER BOND NUMBER OR BANK LETTER OF  
CREDIT: \_\_\_\_\_
6. TYPES OF COMMODITIES  
HANDLED: \_\_\_\_\_ %  
\_\_\_\_\_ %  
\_\_\_\_\_ %  
\_\_\_\_\_ %  
\_\_\_\_\_ %  
\_\_\_\_\_ %  
100%
7. HOW MANY LOADS BROKERED IN PRIOR YEAR: \_\_\_\_\_
8. ESTIMATE GROSS RECEIPTS FORTHCOMING YEAR: \_\_\_\_\_
9. PAST THREE YEARS GROSS RECEIPTS  
2009 \_\_\_\_\_

2008 \_\_\_\_\_

2007 \_\_\_\_\_

10. IN THE PAST THREE YEARS, HAVE YOU BEEN NAMED IN A

SUIT: \_\_\_\_\_

EXPLANATION: \_\_\_\_\_

\_\_\_\_\_

11. IN THE PAST THREE YEARS, HAVE ANY CLAIMS BEEN PAID ON

YOUR BEHALF?

EXPLAIN \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

12. IF NEW IN BUSINESS, STATE

EXPERIENCE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. LIMITS – PLEASE INDICATE WHICH LIMIT TO BE QUOTED:

A. Contingent Automobile Liability

\_\_\_\_\_ \$1,000,000 any one occurrence/\$1,000,000 annual aggregate

\_\_\_\_\_ \$1,000,000 any one occurrence/\$2,000,000 annual aggregate

B. Contingent Cargo Liability

\_\_\_\_\_ \$100,000 per occurrence

\_\_\_\_\_ \$250,000 per occurrence

\_\_\_\_\_ \$500,000 per occurrence

14. IS REFRIGERATION BREAKDOWN REQUIRED? \_\_\_YES \_\_\_NO

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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.

EFFECTIVE DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

This application must be returned with signed Truck Brokers checklist and copy of Broker Authority. Thank you.