DUMP TRUCK SUPPLEMENT

Named Insured: _____

City, State: _____

Completed by: _____ Date: _____

1. Years in business: _____

2. In what geographic area does the insured work? _____

3. Typical radius of trucks? Any regular travel over 200 miles? _____

4. Please describe commodity/commodities commonly hauled: _____

5. Is there a vehicle maintenance program in place? ☐ Yes ☐ No

   a. If yes, is the maintenance done by the insured's own employees or an outside mechanic? _____

   b. Are detailed records kept? ☐ Yes ☐ No

   c. For current fleet of vehicles please provide in depth information on any preventative maintenance done on the vehicles: _____

6. Please provide photo of any truck older than 10 years old.

7. Does the insured have a formal plan in place for MVR screening/analysis? ☐ Yes ☐ No

   a. What MVR criteria are new hires and existing employees held to? (What type activity is acceptable/unacceptable): _____

   b. What happens if a driver falls outside these guidelines? _____

   c. Does the insured check MVR's for all drivers prior to hire and annually thereafter? ☐ Yes ☐ No

   Are records maintained? ☐ Yes ☐ No

8. Does the insured have any requirements on how much experience new employees must have in operating dump trucks/heavy vehicles? ☐ Yes ☐ No

   If so, what are they? _____

9. Is there any training program for new drivers (such as ride alongs or probationary period with owner or tenured employee for new driver)? ☐ Yes ☐ No

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10. Does anyone have 24 hour use of a vehicle? ☐ Yes ☐ No

    If so, please provide full details: _____

    a. Are family members allowed to operate autos? ☐ Yes ☐ No

    b. Any personal usage of business autos? ☐ Yes ☐ No

11. Do you utilize a DOT approved drug screening program for all drivers? ☐ Yes ☐ No

12. Are all dump trucks equipped to cover loads? ☐ Yes ☐ No

    If not, please list all vehicles not equipped with load covers: _____

13. For those vehicles equipped with load covers, are they utilized on all loads? ☐ Yes ☐ No

    If not, what percentage of loads or trips are not covered? _____

14. For each dump truck, please list the date of the last vehicle safety inspection and advise the inspection results and sticker number: _____

_____