Complete with CWCO-SUP-CORE and ACORD 125/126/127. Attach CWCO-SUP-AUTO for the vehicle and driver schedules, and CWCO-SUP-PROP for any storage lot.

APPLICANT NAME	EFFECTIVE DATE REQUESTED	YEARS IN BUSINESS

LOCATION ADDRESS	CITY	STATE / ZIP	PHONE

A OPERATIONS PERFORMED

Check all operations performed:

- ☐ Towing service
- ☐ Lock-out services
- ☐ Auto service — tune-ups, oil changes
- ☐ Motor club / contracted dispatch
- ☐ Vehicle repossession
- ☐ Motorcycle towing
- ☐ Retail store operations
- ☐ Battery delivery and installation
- ☐ Roadside tire changes
- ☐ Auto repair
- ☐ Police rotation towing
- ☐ Long-distance towing
- ☐ Equipment transport
- ☐ Used vehicle sales
- ☐ Battery jumps
- ☐ Emergency fuel delivery
- ☐ Winching / recovery
- ☐ Private property impound
- ☐ Heavy-duty / tractor-trailer towing
- ☐ Storage lot operation
- ☐ Other (describe below)

DESCRIBE AUTO REPAIR, SPECIALIZED TOWING, AND ANY OPERATION CHECKED AS 'OTHER'

NUMBER OF TOW TRUCKS OWNED	NUMBER OF TILT-BED / FLATBED TRAILERS	MAXIMUM TOWING DISTANCE (MILES)	AVERAGE TOWS PER MONTH

OPERATION	ANNUAL RECEIPTS ($)	% OF TOTAL	NOTES

Complete rows for: towing, roadside assistance, repair/service, storage fees, retail sales, and used vehicle sales.

B COVERAGE IN FORCE

B1 Does the applicant carry commercial auto liability coverage? ☐ Yes ☐ No

B2 Does the applicant carry garagekeepers legal liability coverage? ☐ Yes ☐ No

B3 Does the applicant carry on-hook / cargo coverage for vehicles in tow? ☐ Yes ☐ No

AUTO LIABILITY CARRIER / LIMITS	GARAGEKEEPERS CARRIER / LIMITS	ON-HOOK CARRIER / LIMITS

GARAGEKEEPERS BASIS (LEGAL LIABILITY / DIRECT PRIMARY / DIRECT EXCESS)	MAXIMUM VALUE OF ANY ONE VEHICLE TOWED OR STORED ($)

C SPECIALIZED & HIGHER-HAZARD TOWING

C1 Does the applicant perform vehicle repossession services? ☐ Yes ☐ No
IF YES, EXPLAIN

C2 Does the applicant tow tractor-trailers containing flammables, hazardous materials, or hazardous substances? ☐ Yes ☐ No
IF YES, EXPLAIN

C3 Does the applicant handle wrecked vehicles containing hazardous, flammable, or combustible substances? ☐ Yes ☐ No
IF YES, EXPLAIN

C4 Does the applicant perform long-distance or interstate towing? ☐ Yes ☐ No
IF YES, EXPLAIN

C5 Does the applicant perform non-consensual or private property impound towing? ☐ Yes ☐ No
IF YES, EXPLAIN

C6 Does the applicant tow electric or hybrid vehicles, including damaged battery packs? ☐ Yes ☐ No
IF YES, EXPLAIN

C7 Does the applicant sell any used vehicles? ☐ Yes ☐ No
IF YES, EXPLAIN

C8 Does the applicant have any retail store operations? ☐ Yes ☐ No
IF YES, EXPLAIN

If yes to C8, list the products sold and gross sales amount in the explanation field.

D PREMISES, STORAGE LOT & ENVIRONMENTAL

STORAGE LOT SQUARE FOOTAGE	MAXIMUM NUMBER OF VEHICLES STORED	AVERAGE NUMBER OF VEHICLES STORED	MAXIMUM STORAGE DURATION (DAYS)

Storage lot security measures (check all that apply):

☐ Fully fenced ☐ Locked gate ☐ Lighting after dark
☐ Video surveillance ☐ Alarm system ☐ On-site attendant
☐ Guard dog ☐ Paved surface ☐ Indoor / covered storage
☐ Vehicle keys secured indoors ☐ Perimeter patrolled ☐ None of these

DESCRIBE THE SECURITY MEASURES USED TO PROTECT VEHICLES STORED ON SITE

D1 Are there any gasoline pumps on the premises? ☐ Yes ☐ No
IF YES, EXPLAIN

D2 Are all flammable substances stored at a safe distance from potential ignition sources? ☐ Yes ☐ No
IF YES, EXPLAIN

D3 Is a guard dog used to protect the premises? ☐ Yes ☐ No
IF YES, EXPLAIN

D4 Are signs posted warning customers that the applicant is not responsible for items left inside vehicles? ☐ Yes ☐ No

D5 Is a written inventory or condition report completed for each vehicle at pickup and at drop-off? ☐ Yes ☐ No
IF YES, EXPLAIN

DESCRIBE HOW USED TIRES, AUTOMOTIVE FLUIDS, BATTERIES, MOTOR OIL, AND SOILED UNIFORMS OR RAGS ARE DISPOSED OF

E DRIVERS & SAFETY

NUMBER OF DRIVERS	MINIMUM DRIVER AGE	MINIMUM YEARS OF EXPERIENCE REQUIRED	ARE DRIVERS EMPLOYEES OR CONTRACTORS?

E1 Are motor vehicle records pulled at hire and reviewed at least annually? ☐ Yes ☐ No
IF YES, EXPLAIN

E2 Are criminal background checks performed on all drivers? ☐ Yes ☐ No
IF YES, EXPLAIN

E3 Is there a written safety program covering roadside operations, traffic control, and hookup procedures? ☐ Yes ☐ No
IF YES, EXPLAIN

E4 Are drivers required to wear high-visibility apparel and deploy warning devices at roadside? ☐ Yes ☐ No

E5 Are drivers dispatched to interstate highways or high-speed roadways? ☐ Yes ☐ No

IF YES, EXPLAIN

E6 Is drug and alcohol testing performed, and is the applicant enrolled in a DOT testing consortium? ☐ Yes ☐ No

IF YES, EXPLAIN

F LOSS HISTORY

Attach currently-valued loss runs for the last 5 years.

POLICY TERM	CARRIER	LINE OF COVERAGE	ANNUAL PREMIUM	# CLAIMS	TOTAL INCURRED

F1 Has there been any claim for damage to a vehicle in tow or in storage in the last 5 years? ☐ Yes ☐ No

IF YES, EXPLAIN

F2 Has any carrier declined, cancelled or non-renewed coverage in the last 5 years? ☐ Yes ☐ No

IF YES, EXPLAIN

NARRATIVE FOR EACH LOSS OVER $25,000 — CAUSE, CORRECTIVE ACTION TAKEN, AND CURRENT STATUS

G ADDITIONAL INFORMATION

ANYTHING ELSE AN UNDERWRITER SHOULD KNOW — MUNICIPAL CONTRACTS, MOTOR CLUB AFFILIATIONS, EQUIPMENT UPGRADES, OR PLANNED CHANGES

H REPRESENTATIONS & SIGNATURE

The undersigned declares that the statements and answers given in this supplemental are true, complete and correct to the best of their knowledge, and that no material fact has been withheld or misstated. The applicant agrees that this supplemental, together with all ACORD applications and attachments, forms the basis of any submission to insurers and may be relied upon by them. Signing this supplemental does not bind coverage. This supplemental must be signed by an owner, partner or officer of the applicant.

FRAUD NOTICE: 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 and subjects such person to criminal and civil penalties. (State-specific fraud warnings apply; see state amendatory notice.)

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME) | **TITLE** | **DATE**

PRODUCER — CORY WASHINGTON & CO. LLC | **PRODUCER SIGNATURE (TYPE FULL NAME)** | **DATE**