



DEALERS OPEN LOT / GARAGEKEEPERS PROPOSAL FORM

- DEALERS OPEN LOT INSURANCE _____) Specify
 GARAGE KEEPERS LEGAL LIABILITY _____) Coverage
) Required

POLICY PERIOD: _____ To _____

- 1) Name of Assured _____
Address of Assured _____

- 2) Location(s) at which insurance applies
1) _____
2) _____

If there is more than one location, please answer ALL the following questions for EACH location.

- 3) Nature of Trade _____
IF YOU OPERATE A WRECKER SERVICE, PLEASE ALSO COMPLETE AND SIGN THE ATTACHED SUPPLEMENTAL QUESTIONNAIRE
- 5) How many years have you operated the business being proposed for insurance (include in your answer any previous business of a similar nature which may have been operated under a different name or corporate structure)
- A) At the above location(s) _____
B) At any other location(s) _____

****Additional location schedule on last page.

6)

	LOCATION 1		LOCATION 2	
	<u>DOL</u>	<u>GKLL</u>	<u>DOL</u>	<u>GKLL</u>
Max. # of units this location can hold	_____	_____	_____	_____
Max. # of units actually kept at loc.	_____	_____	_____	_____
Avg. # of units kept at location	_____	_____	_____	_____
Max. value per unit	\$ _____	\$ _____	\$ _____	\$ _____
Avg. value per unit	\$ _____	\$ _____	\$ _____	\$ _____
Limit required any one unit	\$ _____	\$ _____	\$ _____	\$ _____
Limit required any one loss	\$ _____	\$ _____	\$ _____	\$ _____

7) Nature of location(s)

- A) A closed building YES NO
- B) An open lot YES NO
- C) Other than above (parking lot, car wash, building with open lot or forecourt), if so please describe

Please enclose diagram showing total area available for storing units.

- 8) a) Are premises unattended at any time during the day or night?
 YES NO
- b) Maximum and minimum number of attendants on duty and their hours
Minimum _____ Maximum _____
- c) If self closing doors in use describe type of lock system used

- d) Burglar Alarm System used _____
- e) Number of entrances _____ Are they also used as exits? YES NO
If not, the number of separate exits _____
- f) If this is a multi-ramp operation, if so, state number of floors and how ramp exists and elevators are protected _____
- g) Are keys left in ignition? YES NO
IF NOT, EXPLAIN PROCEDURE OF HANDLING _____
- h) Are cars examined by attendant for pre-existing damages and marked on parking ticket? YES NO

9) If Open Lot: -

- a) Is Lot completely fenced or surrounded by buildings on all sides?
 YES NO
- b) Are exits and entrances properly supervised? YES NO
- c) If not fenced, state what protections you have:

FRONT _____
REAR _____
LEFT SIDE _____
RIGHT SIDE _____

(If none, state none)

- d) Height and type of fence (or wall etc) _____
- e) What protections against theft have you across exits and entrances?. Describe fully.

- f) Any other protections (Arc Lights, Dogs, Watchmen etc.) Well lit populated area, Central Station w/ Cellular backup _____

Loss experience past 3 Years:

a) At Locations listed above

AMOUNTS

<u>Date of Loss</u>	<u>Details</u>	<u>Collision</u>	<u>Theft</u>	<u>Others</u>

b) Elsewhere

AMOUNTS

<u>Date of Loss</u>	<u>Details</u>	<u>Collision</u>	<u>Theft</u>	<u>Others</u>

What steps have been taken to prevent similar losses? _____

11) Previous Insurers? _____
 (Give Policy Numbers) _____

12) Has your insurance been declined in the past three years? YES NO
 If so, why? _____

- 13) State what type of units are, or are expected to be, on the premises
- New Cars Loc
 - Used Cars Loc
 - Campers Trailers
 - Trucks/Tractors/Trailers/Semi-Trailers
 - Snowmobiles
 - Motorbikes
 - Mobile Homes
 - Other

ASSURED WARRANTIES THAT ALL STATEMENTS MADE IN THE PROPOSAL ARE TRUE, COMPLETE AND HAVE BEEN MADE TO INDUCE UNDERWRITERS TO ACCEPT THE RISK(S) CONTAINED IN THE POLICY, ANY MISREPRESENTATION WILL VOID THE POLICY AND FORFEIT ALL CLAIMS MADE THEREUNDER. A COPY OF THIS PROPOSAL WILL BE INCORPORATED IN THE POLICY AND FORM THE BASIS OF THE CONTRACT BETWEEN THE UNDERWRITERS AND THE ASSURED.

NOTE: THE POLICY, IF ISSUED, WILL BE SUBJECT TO LIMITS OF LIABILITY AT EACH LOCATION, A LIMIT OF ANY ONE UNIT AND SUBJECT TO COINSURANCE.

THIS APPLICATION SHALL NOT BE BINDING ON THE UNDERWRITERS UNLESS AND UNTIL A CONTRACT OF INSURANCE SHALL BE ISSUED AND DELIVERED IN ACCORDANCE HEREWITH AND THEN ONLY AS OF THE COMMENCEMENT DATE OF SAID INSURANCE AND IN ACCORDANCE WITH ALL TERMS THEREOF

Signature Section

This day of 2003

By: _____ Title: _____
 (APPLICANT)

Agent: _____ Agency: _____

**SUPPLEMENTAL QUESTIONS TO BE ANSWERED IF YOU OPERATE
A WRECKER SERVICE**

- h) Maximum Value per Unit on Hook \$ _____
- i) Average Value per Unit on Hook \$ _____
- j) Limit required any one Unit on Hook \$ _____
- k) Number of Wreckers/Towing Units operated _____
- l)
 - i) Number of Drivers _____
 - ii) Ages _____
 - iii) Please indicate if during the past three years any drivers have had: -
 - More than 5 minor traffic violations YES NO
 - Any major traffic violations YES NO
 - Any chargeable or at fault accidents YES NO
 - Any 'driving while impaired or driving under the influence violations YES NO

If the answer to any of the above questions is 'YES' please provide full details below: -

ASSURED'S SIGNATURE (Position in Company)

Date.....

DEALERS OPEN LOT / GARAGEKEEPERS - ADDITIONAL LOCATIONS
SUPPLEMENTAL

Location(s) at which insurance applies

3) _____

4) _____

	LOCATION 3		LOCATION 4	
	<u>DOL</u>	<u>GKLL</u>	<u>DOL</u>	<u>GKLL</u>
Max. # of units this location can hold	_____	_____	_____	_____
Max. # of units actually kept at loc.	_____	_____	_____	_____
Avg. # of units kept at location	_____	_____	_____	_____
Max. value per unit	\$ _____	\$ _____	\$ _____	\$ _____
Avg. value per unit	\$ _____	\$ _____	\$ _____	\$ _____
Limit required any one unit	\$ _____	\$ _____	\$ _____	\$ _____
Limit required any one loss	\$ _____	\$ _____	\$ _____	\$ _____

Location(s) at which insurance applies

5) _____

6) _____

	LOCATION 5		LOCATION 6	
	<u>DOL</u>	<u>GKLL</u>	<u>DOL</u>	<u>GKLL</u>
Max. # of units this location can hold	_____	_____	_____	_____
Max. # of units actually kept at loc.	_____	_____	_____	_____
Avg. # of units kept at location	_____	_____	_____	_____
Max. value per unit	\$ _____	\$ _____	\$ _____	\$ _____
Avg. value per unit	\$ _____	\$ _____	\$ _____	\$ _____
Limit required any one unit	\$ _____	\$ _____	\$ _____	\$ _____
Limit required any one loss	\$ _____	\$ _____	\$ _____	\$ _____