

NEW VENTURE APPLICATION

Applicant Name: _____

Date Coverage Desired: _____

1. Is owner the only driver? _____ If no, question #11 must be fully completed.
2. When did you first obtain your commercial class A license? Month _____ Year _____
3. Have you ever had prior commercial insurance in your or your business name?
If yes, Insurance Carrier: _____ Policy Term(s): _____ to _____
Losses: _____ If yes, details: _____
4. Have you been driving trucks / tractors commercially for at least 3 years?

Provide the following previous employer information where employed as a commercial vehicle driver for at least 3 years.

Name of Prior Employer	Contact Name	Telephone #	Dates Employed (must show a total of at least 3 years)
			to
			to
			to

5. What is the farthest radius traveled? _____ What is the furthest radius that you anticipate traveling? _____
6. Will you be driving for the same company or as an independent operator?
With your vehicle or the companies owned vehicles? _____
7. Will you be traveling out of California? _____ If yes, list states you may travel to _____
How often? _____
8. What type of commodities were you previously hauling while employed? _____
9. What commodities will you be hauling over the next 12 months? _____
10. Have you applied or will you be applying for the following authorities?
☐ MCP – State Authority – CA# _____ ☐ DOT - Federal Authority - MC# _____
- 10a) If not applying for individual authority, whose authority will you be hauling under? MC/DOT# _____
11. Are there other drivers that may drive or operate your vehicle(s)? _____ If yes, provide driver experience for past 3 years.

Drivers Name	Name of Prior Employer	Contact Name & Tel #	Dates Employed (must total 3yrs)
			to
			to
			to

Applicant Signature

Date

Agent Signature

Date