



**HIRED AUTO COVERAGE
TRANSPORTATION SUPPLEMENTAL APPLICATION**

- Colony Insurance Company
- Colony Specialty Insurance Company

- Argonaut Insurance Company
- Argonaut Midwest Insurance Company

Complete if Hired Auto exposure is greater than an 'if any' basis or if requesting stand-alone coverage.

- 1. Why is hired auto coverage being requested? _____
- 2. Number of autos to be scheduled on policy: _____
- 3. Give description of operation: _____
- 4. Estimated cost of hired autos: This year: \$ _____ Last year: \$ _____
- 5. Does any agent, independent contractor, or employee lease autos in the insured's name? Yes No
If "Yes," explain: _____
- 6. Types of autos hired: _____
- 7. What is gross vehicle weight of commercial autos? _____
- 8. What is passenger capacity of public autos? _____
- 9. What is the average term of lease? _____
- 10. Are the same autos leased or does it vary? Same Autos Varies
If the same, explain why the autos cannot be scheduled on the policy: _____
- 11. Do your employees lease/rent autos on insured's behalf? Yes No
If "Yes," under whose name are autos leased/rented? Employee's Insured's
- 12. Are drivers to be provided by the insured to operate hired autos? Yes No
If "No," will the drivers be required to provide Certificates of Insurance? Yes No
- 13. What are the minimum liability limits required by the lessee (named insured): _____
- 14. Does the insured own or control any subsidiary or is it affiliated with any other corporation? Yes No
If "Yes," are vehicles leased from the subsidiary or affiliate? Subsidiary Affiliate
- 15. What is the business of the subsidiary or affiliate? _____
- 16. Does the insured have an ICC broker's authority or provide a brokerage service? Yes No

I declare to the best of my knowledge that all statements herein are true and no material facts have been suppressed or misstated. I am also aware that my operation may be inspected by the insurance company.

Applicant's Signature/Title

Date