

TRANSPORTATION SECTION

DATE (MM/DD/YYYY)

| AGENCY PHONE (A/C, No, Ext): (727) 683-1418 FAX (A/C, No): (866) 844-4047 MazzaBaker Ins & Financial Svcs, LLC 801 West Bay Drive 4th Floor Largo FL 33770 LICENSE #: CODE: SUBCODE: AGENCY CUSTOMER ID | APPLICANT (First Named Insured) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">PROPOSED EFF. DATE</th> <th style="width: 15%;">PROPOSED EXP. DATE</th> <th style="width: 15%;">BILLING PLAN</th> <th style="width: 15%;">PAYMENT PLAN</th> <th style="width: 15%;">AUDIT</th> </tr> <tr> <td> </td> <td> </td> <td>AGENCY DIRECT</td> <td> </td> <td> </td> </tr> </table> FOR COMPANY USE ONLY | PROPOSED EFF. DATE | PROPOSED EXP. DATE | BILLING PLAN | PAYMENT PLAN | AUDIT | | | AGENCY DIRECT | | |
|--|---|--------------------|--------------------|--------------|--------------|-------|--|--|------------------|--|--|
| PROPOSED EFF. DATE | PROPOSED EXP. DATE | BILLING PLAN | PAYMENT PLAN | AUDIT | | | | | | | |
| | | AGENCY DIRECT | | | | | | | | | |

| | |
|--|---|
| INTEREST TYPE | |
| APPLICANT IS: <input type="checkbox"/> COMMON CARRIER <input type="checkbox"/> OTHER <input type="checkbox"/> CONTRACT CARRIER <input type="checkbox"/> SHIPPER OF OWNED PROPERTY | <input type="checkbox"/> TRANSPORTATION MOTOR TRUCK CARGO LEGAL LIABILITY <input type="checkbox"/> OPEN <input type="checkbox"/> ANNUAL OTHER |

| OPERATIONS (Motor truck cargo legal liability on reverse side) | | | | TRANSPORTATION | | | | | |
|---|---|------------|------------|----------------------------|---------------------|-----------------------|------------------------|--------------------------|------------------------------|
| PROPERTY SHIPPED | | | | POINTS OF ORIGIN | | POINTS OF DESTINATION | | | |
| TERRITORY | | | | ANNUAL GROSS SALES | | | | | |
| \$ | | | | | | | | | |
| CONVEYANCE USED | ANNUAL VALUES SHIPPED AT APPLICANT'S RISK | | | AVERAGE VALUE PER SHIPMENT | LIMIT OF LIABILITY | BILL OF LADING | | | |
| | INCOMING | OUTGOING | INTERPLANT | | | FULL VALUE | RELEASED VALUE | | |
| CONTRACT CARRIER | \$ | \$ | \$ | \$ | \$ | YES | NO | \$ | |
| COMMON CARRIER | \$ | \$ | \$ | \$ | \$ | YES | NO | \$ | |
| RAIL | \$ | \$ | \$ | \$ | \$ | YES | NO | \$ | |
| AIR CARRIER | \$ | \$ | \$ | \$ | \$ | YES | NO | \$ | |
| | \$ | \$ | \$ | \$ | \$ | YES | NO | \$ | |
| OWNED VEHICLES | \$ | \$ | \$ | \$ | \$ | | | | |
| TOTAL | \$ | \$ | \$ | \$ | \$ | | | | |
| SPECIAL FORM <input type="checkbox"/> NAMED PERILS <input type="checkbox"/> INCLUDING THEFT | | DEDUCTIBLE | | # TRUCKS OPERATED | # TRACTORS OPERATED | # TRAILERS OPERATED | # TANK-TRUCKS OPERATED | # REFRIG. UNITS OPERATED | SPECIAL UNITS OWNED/OPERATED |

| VEHICLE SCHEDULE (Attach ACORD 129 if necessary. Attach ACORD 163, Driver Information Schedule.) | | | | | | |
|--|------|--------|------------|----------------|------|----------------------|
| Veh # | YEAR | MAKE: | BODY TYPE: | DATE PURCHASED | NEW | RADIUS OF OPERATIONS |
| | | MODEL: | V.I.N.: | | USED | |
| | | MAKE: | BODY TYPE: | DATE PURCHASED | NEW | RADIUS OF OPERATIONS |
| | | MODEL: | V.I.N.: | | USED | |
| | | MAKE: | BODY TYPE: | DATE PURCHASED | NEW | RADIUS OF OPERATIONS |
| | | MODEL: | V.I.N.: | | USED | |

| | |
|--|--|
| F.O.B. | |
| IS CONTINGENT COVERAGE DESIRED ON F.O.B. SHIPMENTS MADE BY THE APPLICANT? <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| IF "YES", ENTER PERCENTAGE OF ANNUAL GROSS SALES REPRESENTED BY F.O.B. SHIPMENTS. _____ % | |

| GENERAL INFORMATION | | | | | |
|---------------------|--|-----|----|----|--|
| # | EXPLAIN ALL "YES" RESPONSES. | YES | NO | # | EXPLAIN ALL "YES" RESPONSES. |
| 1. | IS THERE A VEHICLE MAINTENANCE PROGRAM IN OPERATION? | | | 6. | ARE VEHICLES EQUIPPED WITH THEFT ALARMS? |
| 2. | DOES APPLICANT OBTAIN MVR VERIFICATION FOR DRIVERS? | | | 7. | ARE VEHICLES LEFT UNLOCKED WHEN UNATTENDED? |
| 3. | DOES APPLICANT HAVE A DRIVER RECRUITING METHOD? | | | 8. | ARE VEHICLES LEFT LOADED OVERNIGHT? |
| 4. | DO DRIVERS RECEIVE REGULAR PHYSICALS? | | | 9. | DOES APPLICANT BACK HAUL PROPERTY OF OTHERS? |
| 5. | ANY WATERBORNE SHIPMENTS TO BE COVERED? | | | | |

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|---------|
| REMARKS |
|---------|

OPERATIONS

MOTOR TRUCK CARGO LEGAL LIABILITY

| | | | | | | | | |
|--|---------------------|---------------------------|------------------------------------|---------------------|-------------------------------|--------------------------|--------------------------|------------------------------|
| PROPERTY HAULED | | | GROSS RECEIPTS LAST 12 MONTHS | | GROSS RECEIPTS NEXT 12 MONTHS | | | |
| | | | \$ | | \$ | | | |
| TERRITORY | | | AVERAGE DISTANCE | | MAXIMUM DISTANCE | | | |
| | | | | | | | | |
| LIST TARGET COMMODITIES CARRIED | % OF GROSS REVENUES | MAXIMUM VALUE PER VEHICLE | LIST STATES WHERE FILINGS REQUIRED | | | DOCKET NO. _____ | | |
| | | | | | | I.C.C. FILING REQUIRED | | |
| | % | \$ | DOCKET NO. _____ | | | | | |
| | % | \$ | | | | | | |
| | % | \$ | | | | | | |
| | % | \$ | LIMIT OF LIABILITY | | | | | |
| | % | \$ | SINGLE CONVEYANCE | PER DISASTER | LOADING/UNLOADING | | | |
| | % | \$ | | | LIMIT | DEDUCTIBLE | | |
| | % | \$ | \$ | \$ | \$ | \$ | | |
| | % | \$ | | | | | | |
| SPECIAL FORM NAMED PERILS | | DEDUCTIBLE | # TRUCKS OPERATED | # TRACTORS OPERATED | # TRAILERS OPERATED | # TANK-TRAILERS OPERATED | # REFRIG. UNITS OPERATED | SPECIAL UNITS OWNED/OPERATED |
| <input type="checkbox"/> INCLUDING THEFT <input type="checkbox"/> LOADING/UNLOADING | | | | | | | | |

TERMINALS

| LOC. # | ADDRESS (ACORD 125) | AVERAGE VALUE AT TERMINAL | MAXIMUM VALUE AT TERMINAL | LIMIT OF LIABILITY |
|--------|---------------------|---------------------------|---------------------------|--------------------|
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |

VEHICLE SCHEDULE (Attach ACORD 129 if necessary. Attach ACORD 163, Driver Information Schedule.)

| Veh # | YEAR | MAKE: | BODY TYPE: | DATE PURCHASED | NEW | RADIUS OF OPERATIONS |
|-------|------|--------|------------|----------------|------|----------------------|
| | | MODEL: | V.I.N.: | | USED | |
| | | MAKE: | BODY TYPE: | DATE PURCHASED | NEW | RADIUS OF OPERATIONS |
| | | MODEL: | V.I.N.: | | USED | |
| | | MAKE: | BODY TYPE: | DATE PURCHASED | NEW | RADIUS OF OPERATIONS |
| | | MODEL: | V.I.N.: | | USED | |

GENERAL INFORMATION

| # | EXPLAIN ALL "YES" RESPONSES. | YES | NO | # | EXPLAIN ALL "YES" RESPONSES. | YES | NO |
|----|--|-----|----|-----|--|-----|----|
| 1. | IS THERE A VEHICLE MAINTENANCE PROGRAM IN OPERATION? | | | 9. | DO TERMINALS HAVE FIRE PROTECTION (Sprinklers, hoses, etc.)? | | |
| 2. | DOES APPLICANT OBTAIN MVR VERIFICATION FOR DRIVERS? | | | 10. | DO TERMINALS HAVE SECURITY SYSTEMS (Guards, alarms, fences, lights, dogs, etc.)? | | |
| 3. | DOES APPLICANT HAVE A DRIVER RECRUITING METHOD? | | | 11. | ARE VEHICLES LEFT LOADED OVERNIGHT? | | |
| 4. | DO DRIVERS RECEIVE REGULAR PHYSICALS? | | | 12. | IS THE APPLICANT AN OWNER OPERATOR? | | |
| 5. | ARE VEHICLES EQUIPPED WITH THEFT ALARMS? | | | 13. | DOES THE APPLICANT HIRE OWNER OPERATORS? | | |
| 6. | ARE VEHICLES LEFT UNLOCKED WHEN UNATTENDED? | | | 14. | DOES THE APPLICANT TRIPLELEASE TO OTHERS? | | |
| 7. | ARE OVERAGES, SHORTAGES, & DAMAGE CLAIMS PENDING? | | | 15. | DOES THE APPLICANT BACK HAUL PROPERTY OF OTHERS? | | |
| 8. | ARE ANY VEHICLES OPERATED FOR THE APPLICANT BY OTHERS? | | | | | | |

REMARKS