



**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