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HEAVY VEHICLE & EQUIPMENT QUESTIONNAIRE

BY COMPLETING THIS APPLICATION, THE APPLICANT IS APPLYING FOR COVERAGE WITH EITHER ***COLONY INSURANCE COMPANY*** OR ***COLONY SPECIALTY INSURANCE COMPANY***, AN AUTHORIZED SURPLUS LINES INSURER OR ***ARGONAUT INSURANCE COMPANY*** OR ***ARGONAUT MIDWEST INSURANCE COMPANY***, A LICENSED INSURER.

Business Trade Name: _____

1. What percentage of applicant's operations involve: (Must total 100%)

Boom Trucks/Bucket Trucks	%	Logging Trucks/Equipment	%
Buses	%	Military Vehicles	%
Construction Equipment	%	Mining Equipment*	%
Municipal Vehicles	%	Oilfield Equipment*	%
Cranes	%	Refrigerated Vans/Trailers	%
Farm Equipment	%	Semi-Trailers	%
Farm Implements	%	Tank Trailers/Tankers	%
Forklifts	%	Truck Tractors	%
Lawn/Tree Service Equipment	%	Other*	%

*Describe "Other" and type of equipment:

2. Where are applicant's operations performed? (Must total 100%)

Your Shop	%	Truck & Travel Center	%
Customer's Yard	%	Roadside	%

3. Type and Percentage of applicant's work. (Must total 100%)

Body & Paint	%	Repair Tank Trailers (External)	%
Blades/Cutting Equip/Chippers	%	Snowplow Repair/Installation – *GVW of Vehicles:* _____	%
Brakes	%	Subcontracted out to others	%
Brakes - Logging Truck/Equipment	%	Structural/Frame Modifications *Do you cut frames between the axles?* ☐ *Yes* ☐ *No*	%
Engine Overhaul	%	Suspension/Frame Repairs	%
Fabrication *(Answer Question 8)*	%	Suspension - Logging Truck/Equipment	%
FMCSA Safety Inspection *(Answer Question 9)*	%	Tank Clean/Repair - Internal	%
Hydraulics - General	%	Tank Repair - External	%
Hydraulics – Lifting Apparatus	%	Tire Repair or Replacement	%
Lube & Oil	%	Tune Up	%
Power Train	%	Wash & Detail	%
Radiator	%	Other *	%
Refrigeration Unit (Cargo Area)	%		

*Describe "Other" work in detail:

4. Does applicant install, service or repair 5th Wheels? ☐ Yes ☐ No
If "Yes", what are the qualifications of the employees doing this work?

5. Are you and/or your mechanics ASE Certified? ☐ Yes ☐ No
If "No", how many years of training and experience do you require?_____

6. Do you test drive extra-heavy trucks or truck tractors away from garage premises on public roadways? ☐ Yes ☐ No
If "Yes", is at least one driver appropriately licensed with a CDL? ☐ Yes ☐ No

7. Do you transport any owned or non-owned semi trucks by "piggybacking"? ☐ Yes ☐ No

8. What parts, equipment, and accessories do you fabricate?

9. If applicant does FMCSA annual vehicle safety inspections, answer the following:

a. Does Inspector understand the FMCSA inspection criteria? ☐ Yes ☐ No

b. Has Inspector mastered the methods, procedures, tools and equipment used when performing an inspection? ☐ Yes ☐ No

c. Has Inspector successfully completed a State or Federal training program which qualifies him to perform commercial vehicle safety inspections? ☐ Yes ☐ No

d. Does Inspector have at least one (1) year of training and/or experience consisting of:

- participation in a manufacturer sponsored training program; or
- experience as a mechanic or inspector:

1] in a motor carrier maintenance program; or ☐ Yes ☐ No

2] in a commercial garage; or ☐ Yes ☐ No

3] for a State or Federal government? ☐ Yes ☐ No

THIS SUPPLEMENTAL APPLICATION IS INCORPORATED BY REFERENCE INTO THE PRIMARY APPLICATION

APPLICANT'S SIGNATURE	DATE