

- Western World Insurance Company
- Tudor Insurance Company
- Stratford Insurance Company

Supplemental  
Application  
For  
**Hired and Non-Owned Auto**

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Applicant's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Applicant's Web Site Address: \_\_\_\_\_

1. Why is Hired and Non-Owned Auto coverage being requested? \_\_\_\_\_

2. Any owned or long-term Leased Commercial Autos?  Yes  No

If yes, types of autos leased? \_\_\_\_\_

Who is auto insurance carrier? \_\_\_\_\_

3. Number of: Officers/Partners \_\_\_\_\_ Employees \_\_\_\_\_ Volunteers \_\_\_\_\_

4. Any autos rented on a temporary basis?  Yes  No

a) If yes, from whom? \_\_\_\_\_

b) Types of autos Applicant hires? \_\_\_\_\_

c) Duration of use? \_\_\_\_\_

d) Frequency? \_\_\_\_\_

e) Is insurance purchased from rental company?  Yes  No

5. Does Applicant require any employee to use their personal auto to conduct Applicant's business?  Yes  No

6. How often are non-owned autos used in Applicant's business?  Daily  Weekly  Monthly

Estimated number of hours per month: \_\_\_\_\_

What is estimated annual mileage of non-owned autos? \_\_\_\_\_ Miles

What is the maximum distance that a non-owned auto may be driven from Applicant's premises? \_\_\_\_\_ Miles

7. Total number of non-owned autos used in Applicant's business? \_\_\_\_\_

8. Does the Applicant require employees and volunteers to have their own auto insurance?  Yes  No

If yes, what are the minimum limits required? \_\_\_\_\_

Does the Applicant require evidence of insurance?  Yes  No

How often is this updated? \_\_\_\_\_

9. Does Applicant obtain MVR's on employees using their own vehicles?  Yes  No

If yes, how does Applicant address unclean records? \_\_\_\_\_

10. Any transportation of clients to-and-from Applicant's premises or to-and-from appointments?  Yes  No

11. Will Applicant use non-owned autos other than those owned by Applicant's employees?  Yes  No

If yes, please describe: \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_