Clear Form

Atlantic Casualty INSURANCE COMPANY™

AUTO DEALERS AND GARAGE APPLICATION

Proposed Effective Date: _____
Proposed Expiration Date: _____

Producer: **Name** _____
Address _____
Phone # _____

☐ **Individual** ☐ **Partnership** ☐ **Corporation** ☐ **Joint Venture** ☐ **Limited Liability Corp.**

Applicant Name: _____ **Business Phone:** _____
Mailing Address: _____ **Website:** _____
_____ **Years in Business:** _____
Contact Name & Email: _____ **Years of Experience:** _____

Locations: ☐ Same as above

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

List any states where operations are conducted outside scheduled locations: _____

UNDERWRITING INFORMATION

	Yes	No
1. Are you involved in auto leasing or rental operations?	☐	☐
2. Are you involved in importing autos?	☐	☐
3. Do you sell, rent or loan Dealer or Transporter plates to others?	☐	☐
4. Do you allow overnight test drives?	☐	☐
5. Are you involved in public or livery passenger conveyance or on-demand delivery/courier services?	☐	☐
6. Are you involved in any racing, race car preparations/repair or race sponsorship?	☐	☐
7. Do you have any Liquefied Petroleum Gas (LPG) exposures in your operations?	☐	☐
If yes, do you abide by the NFPA 58 - Liquefied Petroleum Gas Code?	☐	☐
8. Are jacks or car lifts located in an unprotected area after work hours?	☐	☐
9. Are operations conducted from a personal residence?	☐	☐
Do you store autos held for sale at the residence? If yes, include in locations above.	☐	☐
Do you have a homeowners/renters policy in place?	☐	☐
10. Are you involved in any operations under a different entity?	☐	☐

Provide name and details: _____

Comments: _____

PRIOR CARRIER AND LOSS INFORMATION

☐ No Prior Carrier ☐ No Prior Losses

Prior Carrier	Policy Yr.	Description of Loss	Amount Paid	Amount Reserved

NATURE OF BUSINESS (INDICATE PERCENTAGE OF EACH)

Total of all percentages on this page should equal 100% **Supplement Required*

SALES Dealer License Number: _____

_____ % Antique or Classic Auto Dealer
_____ % ATV, UTV, Dirt Bike or Snowmobile Dealer*
_____ % Auto Auction
_____ % Auto Dealer - PPV and Light/Medium Truck - Franchise
_____ % Auto Dealer - PPV and Light/Medium Truck - Nonfranchise - Retail
_____ % Boat or Jet Ski Dealer
_____ % Bus Dealer*
_____ % Camper, Fifth Wheel or Travel Trailer Dealer*
_____ % Consigned Autos - *Include consignment agreement*
_____ % Contractor's Equipment Dealer*
_____ % Emergency Vehicle Dealer*
_____ % Farm Equipment Dealer*
_____ % Golf Cart Dealer
_____ % Heavy Truck Dealer*
_____ % Imported Autos
_____ % Logging Equipment Dealer*
_____ % Mining Equipment Dealer*
_____ % Mobile Home Dealer
_____ % Motorcycle Dealer*
_____ % Race Car Dealer
_____ % RV Dealer*
_____ % Salvage Titled Autos
_____ % Semi Trailer Dealer*
_____ % Tank or Tank Truck Dealer*
_____ % Trailer Dealer - Utility/Livestock
_____ % Wholesale Auto Dealer, Broker, or Internet Sales
Miles from personal residence to operation location: _____

PARKING AND STORAGE

Valet Parking:
_____ % Designated Locations - No Street Driving or Parking*
_____ % Designated Locations - Including Street Driving or Parking*
_____ % Blanket Basis - Including Special Events*
_____ % Impound Yard
_____ % Long Term Auto Storage
_____ % Parking Facilities - No Valet
_____ % RV Storage
_____ % Watercraft Storage

SERVICE OR REPAIR

_____ % Airbag Installation or Repair
_____ % Alarm Installation or Repair
_____ % Antique or Classic Auto Repair
_____ % ATV, UTV, Dirt Bike or Snowmobile Repair*
_____ % Auto Dismantling
_____ % Auto Maintenance and Repair
_____ % Autonomous/Self-Driving Autos
What level of automation (SAE Level 0-5)? _____
_____ % Auto Parts and Accessory Sales *Receipts:* _____
_____ % Auto Pawning
_____ % Bedliner Installation
_____ % Boat or Jet Ski Repair
_____ % Body Shop & Painting with UL Approved Booth
_____ % Body Shop & Painting without UL Approved Booth
Explosion Proof Lighting/Adequate Ventilation Present? _____
_____ % Brake Replacement or Repair
_____ % Bus Repair*
_____ % Camper, Fifth Wheel or Travel Trailer Repair*
_____ % Car Wash - Full Service
_____ % Car Wash - Self Service
_____ % Contractor's Equipment Repair*
_____ % Convenience Store
_____ % Conversion Shop
_____ % Detailer
_____ % Drive-Away Contractor or Concierge
_____ % Emergency Vehicle Repair*
_____ % Farm Equipment Repair*
_____ % Frame Straightening
_____ % Frame Cutting, Stretching, Shortening
_____ % Gasoline Station - Full Service
_____ % Gasoline Station - Self Service
_____ % Golf Cart Repair
_____ % GPS Installation
_____ % Heavy Truck Repair*
_____ % High Performance Shop
_____ % Ignition Interlock
_____ % Inspection Station
_____ % Lift Kit Install *Any over 6"?* _____
_____ % Logging Equipment Repair*
_____ % Machine Shop
_____ % Manufacturing or Assembly - Including Kit Cars
_____ % Mining Equipment Repair*
_____ % Mobile Auto Repair
_____ % Motorcycle Repair*
_____ % Oil/Lube Shop
_____ % Refrigeration Unit Servicing
_____ % Repossession - For-Hire
_____ % RV Repair*
_____ % Salvage Yard
_____ % Semi Trailer Repair*
_____ % Stereo Installation
_____ % Tank or Tank Truck Repair*
_____ % Tire or Rim Dealer or Repair
_____ % Trailer Repair - Utility/Livestock
_____ % Upholstery
_____ % Welding - Auto
_____ % Welding - Other than Auto
_____ % Window Tinting
_____ % Windshield Replacement/Repair
_____ % Wrapping of Autos
_____ % Wrecker For-Hire
_____ % Wrecker Not-For-Hire
_____ % Other: _____

OWNER, EMPLOYEE AND HOUSEHOLD MEMBER INFORMATION

Have all employees and household members been disclosed? Yes ☐ No ☐

Full Name	Date of Birth	Driver's License #	State	FT or PT	Class See Below	# Acc/Viol (past 3 yrs)	Has Pers. Auto policy?

FURNISHED a Covered Auto for Personal Use

Class A - any individual working in the business who is Furnished
Class B - non-employees without a personal auto policy in place
Class C - non-employees with a personal auto policy in place

NOT FURNISHED a Covered Auto for Personal Use
Use Primary Job Duty

Class D - auto salespeople, contract drivers or valet parkers
Class E - mechanics or lot persons
Class F - clerical or sales counter duties

LIABILITY COVERAGE

Symbol(s): ☐ 21 - Any Auto ☐ 22 - Any Owned Auto ☐ 28 - Hired Autos ☐ 29 - Non-Owned Autos
Pickup & Delivery Distance: ☐ 0-300 Miles ☐ Over 300 Miles

Deductible: _____

Covered Autos Liability	_____	Limit Each Accident
General Liability - Bodily Injury & Property Damage	_____	Limit Each Accident
Damage to Premises Rented to You	_____	Limit Any One Premises
Personal & Advertising Injury Liability	_____	Any One Person or Organization
	_____	General Liability Aggregate
	_____	Products & Work You Performed Aggregate

LOT PROTECTION TYPES

Building: structure with roof and walls
Non-Standard Lot: fencing other than standard
Standard Lot: 6' metal cyclone or equivalent fence
Unprotected: no fencing around entire lot

GARAGEKEEPERS COVERAGE

Coverage: ☐ Specified Causes ☐ Comprehensive ☐ Collision Deductible: _____
Coverage Basis: ☐ Legal Liability ☐ Direct Excess ☐ Direct Primary Per Auto Limit: _____

Loc:	Lot Protection:	Lot Limit:	Loc:	Lot Protection:	Lot Limit:
1.			5.		
2.			6.		
3.			7.		
4.			8.		

DEALER'S PHYSICAL DAMAGE COVERAGE

Coverage: ☐ Specified Causes ☐ Comprehensive ☐ Collision Deductible: _____
☐ False Pretense - *Are customers accompanied on test drives?* _____ Per Auto Limit: _____

Loss Payee Name and Address: _____

Loc:	Lot Protection:	Lot Limit:	Average Number of autos held for sale:	If Lot Protection is Building: Is the building sprinklered?	If Lot Protection is Building: Is there a Central Station Fire Alarm?
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

UNINSURED, UNDERINSURED AND PERSONAL INJURY PROTECTION

- ☐ Uninsured Motorists Limit: _____
- ☐ Underinsured Motorists Limit: _____
- ☐ Personal Injury Protection Limit: _____
- ☐ Virginia Medical Expense & Income Loss Limit: _____

Number of Dealer Plates: _____

OPTIONAL COVERAGES

- ☐ Locations & Operations Medical Payments
  Limit Per Person: _____
- ☐ Auto Medical Payments
  Limit Per Person: _____
- ☐ Broad Form Products
- ☐ Drive Other Car
- ☐ Employee Benefits Liability
- ☐ Employers Liability Insurance (Stop Gap) - only available in North Dakota, Ohio, Washington and Wyoming
  - ☐ $100,000 Each Accident - $100,000 Each Employee - $200,000 Aggregate
  - ☐ $300,000 Each Accident - $300,000 Each Employee - $600,000 Aggregate
  - ☐ $500,000 Each Accident - $500,000 Each Employee - $1,000,000 Aggregate
  - ☐ $1,000,000 Each Accident - $1,000,000 Each Employee - $2,000,000 Aggregate

Auto Dealers Acts, Errors or Omissions

- ☐ Truth in Lending
- ☐ Odometer
- ☐ Insurance Agents or Brokers
- ☐ Title

ADDITIONAL INSURED OPTIONS

- ☐ Additional Insured - Owner of Leased or Rented Land or Premises (AGP-023)
- ☐ Additional Insured - Lessor of Leased Equipment (AGP-019)
- ☐ Additional Insured - Grantor of Franchise (AGP-020)
- ☐ Designated Insured (AGP-018) - *Describe Interest*
- ☐ Waiver of Transfer of Rights of Recovery Against Others to Us (AGP-035)
- ☐ Blanket Waiver of Transfer of Rights of Recovery Against Others to Us (AGP-044)
- ☐ Primary and Noncontributory (AGP-007)

SCHEDULED AUTOS - Available in AL, CA, MS, MO, OH, SD, TN, TX, WA, WY

Coverage(s): ☐ Liability ☐ Specified Causes ☐ Comprehensive ☐ Collision

Physical Damage Deductible: _____ Are Scheduled Autos owned by this entity? _____

Year/Make/Model	GVW	VIN	Vehicle Value	Towing (Y/N)

If trailers are scheduled above, what is the maximum numbers of autos they can transport? _____

What is the maximum distance traveled by scheduled autos? _____

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE _____ **DATE** _____ **APPLICANT'S SIGNATURE** _____ **DATE** _____