

TRUCKING

WORKERS' COMPENSATION SUPPLEMENTAL APPLICATION

GENERAL INFORMATION

Company Name			DOT #	
			MCP/PUC filing #	
Year Business Started			Web Address	
Physical location of each terminal (City and State)				
States units are garaged at driver's residence				
Can drivers be dispatched from their residence?	☐ Yes ☐ No	Percentage of hauls that are regular routes		
Is there any driving or deliveries in Florida?	☐ Yes ☐ No	Percentage of LTL freight		
Are there any businesses owned or operated by applicant other than company listed above?	☐ Yes ☐ No	List Other Businesses (if any)		
If "Yes" above, is there any interchange of labor?	☐ Yes ☐ No			
How are drivers paid?	☐ Hourly ☐ Per Mile ☐ Per Trip ☐ % of Load ☐ Other		Average full-time wage or rate of pay?	
Radius of Operation	☐ % < 200 miles ☐ % 200-300 miles ☐ % 300-500 miles ☐ % 500-1000 miles ☐ % > 1000 miles			
States (or area) other than home base traveled to frequently				
Number of driving teams		Number of any mechanics, clerical or other employees fill-in as a truck driver as needed?		
Does company owner drive a truck?	☐ Yes ☐ No		Is company owner to be included on policy?	☐ Yes ☐ No

EQUIPMENT

Number of Power Units (Including trucks leased to/from others)							
Conventional		Straight Trucks		Dump Trucks		Wreckers	
Cabovers		Other					
Trailers (Percentage of total annual fleet miles) ** Must Equal 100% **							
Van/Dry Box	%	Intermodal Containers	%	Open-Top Van (chip)	%	Flatbed	%
Liquid Tanker	%	Drop/Step-Deck (etc.)	%	Hopper Bottom	%	Reefer	%
Dry Bulk	%	Walking Floor	%	Compressed Gas	%	Logging	%
Livestock	%	Curtain-Side	%	Auto Transporter	%	Dump	%
Other	%	Describe "Other" Types of Trailers					
Do drivers pull any double or triple trailers?	☐ Yes ☐ No		Speed at which trucks are governed?				

COMMODITIES COMMONLY TRANSPORTED

List the most commonly transported commodities and the % of total freight that each represents.			
Does the applicant haul hazardous materials	☐ YES ☐ NO	Percentage of freight categorized as HazMat	%
 If HazMat freight is transported, list the chemicals transported, the frequency at which they are transported and the personal protective equipment worn by drivers during loading/unloading on page 3 of this document.			

DRIVERS

Minimum age for new driver		Do driver selection procedures include the following (Check all that apply)	
Minimum experience required			
# of full-time employee drivers			
# of part-time employee drivers			
Number of W2 forms issued in previous calendar year			Number of 1099 forms issued in previous calendar year
What is the estimated percentage of driver turnover?			Describe recent trends in driver turnover
Number of "true" owner/operators (own the truck they operate)			Number of "fleet operators" (operate truck owned by other entity)
• To be included on workers' compensation policy?		☐ Yes ☐ No	• To be included on workers' compensation policy?
• Certificates of coverage obtained?		☐ Yes ☐ No	• Certificates of coverage obtained?

MAINTENANCE OPERATION

(CHECK ALL THAT ARE APPROPRIATE)

☐	There are no employee mechanics - All truck and trailer service/repair is performed by outside entities)	☐	One or more employees performs <u>most</u> non-warranty service/repair work on company-owned power-units
☐	One or more employees performs preventative maintenance <u>only</u> (brakes, lights, oil, grease, etc)	☐	One or more employees performs service/repair work on company-owned trailers
☐	One or more employees repairs and/or mounts tires	☐	One or more employees performs service repair work on for equipment not owned or operated by the applicant
	Tire cage used? ☐ Yes ☐ No		
☐	One or more employees performs roadside repairs	☐	One or more employees performs work that involves tank entry

DRIVER INTERACTION WITH FREIGHT

(EXPRESSED AS PERCENT OF HAULS)

Drivers load or unload with material handling aids	%	Drivers tarping freight without tarping mechanical system	%
Drivers load or unload without material handling aids	%	Drivers secure freight using load-locks, bars, straps or chains	%
Drivers tailgating freight	%	Drivers are involved in decking and/or blanket-wrapping	%
Drivers top-load tankers (access using loading rack)	%	Other (describe)	
Drives top-load tankers (access using tanker ladder)	%		
Percentage of loads lumpers are used	%	Do lumpers carry workers' compensation coverage?	☐ Yes ☐ No
		Are certificates obtained for lumpers?	☐ Yes ☐ No

GENERAL SAFETY MANAGEMENT

Frequency of driver safety meetings?		Contact Information for company safety director		
Incentive for clean roadside inspections?	☐ Yes ☐ No			NAME
Is there a safety-related incentive program?	☐ Yes ☐ No			E-MAIL ADDRESS
Does employer use electronic HOS logs	☐ Yes ☐ No			PHONE
Is modified duty used to control claims costs?	☐ Yes ☐ No	<i>Any person who knowingly and with intent to defraud an insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.</i>		
Percent of employee participation in employer-provided healthcare insurance? (N/A if not offered)	%			
Applicant's Signature		Date	Agent's Signature	
			Date	

**OWNER OPERATORS (O/OPS) – Midwestern Underwriting Rule

In states where O/OPS are excluded by statute payroll will be included at audit unless; either a certificate of insurance for Worker's Compensation or proof of Occupational Accident Coverage is provided. In all other states (except North Carolina) O/OPS will be included in payroll at audit unless a Certificate of Insurance for Worker's Compensation is provided. North Carolina requires O/OPS to be included in coverage.

Please submit with Driver Schedule, Vehicle Schedule, Historical Premiums and Payrolls for the Past Five Years (or number of years in business if less than five years).

Hiring Practices Check YES only if Applicable to 75%+ of Labor		
Yes	No	Written Application
Yes	No	Written Job Description
Yes	No	Background/Reference Check
Yes	No	Pre-Hire Drug Testing
Yes	No	Pre-Hire Physical Fitness Test
Yes	No	MVR Check
Yes	No	Interview
Yes	No	Road Test
Yes	No	FMCSA Pre-Employment Screen

Safety Practices Check YES only if Applicable to 75%+ of Labor		
Yes	No	Formal Injury & Illness Prevent. Plan
Yes	No	Formal Return to Work Plan
Yes	No	Quarterly (or More) Safety Meetings
Yes	No	Quarterly (or More) Safety Trainings
Yes	No	Safety Incentive Plan
Yes	No	Clean Roadside Inspection Incentive
Yes	No	Electronic Logbooks
Yes	No	GPS Devices (Installed & Used)

Management Practices, Loss Control, Claims Handling & Benefits		
Yes	No	Is the ownership active in the day-to-day operations of the company?
Yes	No	Is there a full-time risk/safety manager employed whose job is 50%+ safety related?
Yes	No	Is there a formal and random drug testing program for all employees?
Yes	No	Is there a formal post-accident drug testing program for all workplace injuries?
Yes	No	Upon termination are personnel files documented for any potential workplace injuries?
Yes	No	Is there a formal accident investigation and claims reporting process?
Yes	No	Do more than 50% of employees receive group health through you that is 50%+ employer paid?
Yes	No	More than 25% turnover of all drivers since last year?
Yes	No	More than 50% turnover of all drivers since last year?

Details, descriptions and/or notes

Freight Interaction (Must Total to 100%) [Explain Other* Answers in Blank Section at Bottom]	
% of All Hauls	Interaction with Freight
%	Drivers Load/Unload by Hand
%	Drivers Load/Unload with Manual Pallet Jacks
%	Drivers Load/Unload with Electric Pallet Jacks / Forklifts
%	Drivers Tailgate Freight
%	Drivers Load/Unload Tanker Trailers (via Loading Rack)
%	Drivers Load/Unload Tanker Trailers (via Trailer Ladder)
%	Drivers Tarp Loads Manually (without Mechanical Tarping System)
%	Drivers Tarp Loads Automatically (with Automatic Tarping System)
%	Drivers Strap/Chain Loads on Flatbed / Drop-Deck / Step-Deck Trailers
%	Drivers Perform Decking / Blanket-Wrapping / Etc.
%	Other*

Describe all Others* Answers from Above



HAZMAT FREIGHT OVERVIEW

PLEASE LIST THE 5 MOST FREQUENTLY TRANSPORTED HAZMAT FREIGHT IN EACH CATEGORY

	Chemical Name and UN#	Approx # Loads/Month	PPE Worn by Driver when Loading/Unloading
CLASS 2 Gases			
CLASS 3 Flammable Liquid and Combustible Liquid			
CLASS 4 Flammable Solid, Spontaneously Combustible, Dangerous			
CLASS 5 Oxidizer & Organic Peroxide			
CLASS 6 Poison (Toxic) and Poison Inhalation Hazard			
CLASS 8 Corrosive			
Approximate number of total loads per month of any/all freight, including HazMat loads and non-HazMat loads			
Does the company transport any Class 1 (Explosives) Freight?		☐ Yes ☐ No	(if "Yes" attach a narrative regarding this freight)
Does the company transport any Class 7 (Radioactive) Freight?		☐ Yes ☐ No	(if "Yes" attach a narrative regarding this freight)
Does the company have a written OSHA Hazard Communication Program?			☐ Yes ☐ No

Please submit with [Driver Schedule](#), [Vehicle Schedule](#), [Historical Premiums and Payrolls for the Past Five Years](#) (or number of years in business if less than five years).