

# CENTURY SURETY COMPANY

## HIRED and NON-OWNED AUTOMOBILE SUPPLEMENT

1. Applicant's Name \_\_\_\_\_
2. Mailing Address \_\_\_\_\_
3. Why is coverage being requested? \_\_\_\_\_  
\_\_\_\_\_
4. How will the vehicles be used? \_\_\_\_\_  
\_\_\_\_\_
5. What will be transported by these vehicles: \_\_\_\_\_  
\_\_\_\_\_
6. What is maximum distance non-owned vehicle will be driven from insured premises: \_\_\_\_\_
7. How often are non-owned vehicles used? \_\_\_\_\_
8. Total number of non-owned vehicles used? \_\_\_\_\_
9. Total number of employees: \_\_\_\_\_
10. Does applicant require employees to provide proof of auto liability coverage?  Yes  No
11. If yes, for what minimum limit? \_\_\_\_\_
12. What is estimated cost of hire? \_\_\_\_\_
13. Type of vehicles hired: \_\_\_\_\_ What is GVW? \_\_\_\_\_
14. What is average term? \_\_\_\_\_
15. Does applicant have a Commercial Auto Liability Policy in force?  Yes  No

Coverage Desired:

<b>Hired and Non-Owned Coverage</b>	\$100,000	\$300,000	\$500,000	\$1,000,000
<b>Non-Owned Auto Coverage</b>	\$100,000	\$300,000	\$500,000	\$1,000,000

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_