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## Repair And Service Operations Supplemental Application

TO BE USED WITH COMMERCIAL GENERAL LIABILITY APPLICATION (ACORD 125), or OTHER SIMILAR APPLICATION.

All questions must be answered in full. Application must be signed and dated by the applicant.

Applicant's Name \_\_\_\_\_ Agent \_\_\_\_\_  
\_\_\_\_\_

Applicant Mailing Address \_\_\_\_\_ Applicant's Phone Number \_\_\_\_\_  
\_\_\_\_\_ Web Address \_\_\_\_\_  
\_\_\_\_\_ Inspection Contact \_\_\_\_\_

Proposed Policy Period \_\_\_\_ to \_\_\_\_ Phone Number for Inspection Contact: \_\_\_\_\_

Applicant is  Individual  Partnership  Corporation  Joint Venture  Other \_\_\_\_\_  
\_\_\_\_\_

Location #1 \_\_\_\_\_

Location #2 \_\_\_\_\_

Location #3 \_\_\_\_\_

### NATURE OF YOUR BUSINESS

Repair Shop  Body Shop  Gas Station  Parking Facility  Other \_\_\_\_\_

### UNDERWRITING INFORMATION

1. How many years of experience do you have in this field? \_\_\_\_\_

2. How many autos do you own? \_\_\_\_\_

3. Are autos stored inside a building? .....  Yes  No  
If yes, does building have? .....  Sprinklers  Alarm  
What is the building construction? \_\_\_\_\_ What is the protection class? \_\_\_\_\_

4. If autos are stored outside, describe lot.  Standard  Non-Standard  Un-Fenced

**Standard open lots** are open parking storage lots enclosed on all sides by a metal cyclone or equivalent fence not less than six feet in height; or bounded on one or more sides by the wall or walls of a building, with no unprotected openings, and the exposed sides of the lot enclosed by a metal cyclone or equivalent fence not less than six feet in height, with openings securely locked when unattended.

**Non-standard open lots** are all other open lot locations, or unroofed space and buildings not securely enclosed and locked when unattended.

5. What precautions are taken to prevent theft or vandalism damage to the following:  
a. Customers' Autos \_\_\_\_\_  
b. Employees' Tools \_\_\_\_\_

6. Are used rags stored in a metal container and picked up daily? .....  Yes  No

7. Verify "no smoking" is allowed in shop. \_\_\_\_\_

8. Verify all paint is stored in metal cabinets. \_\_\_\_\_

9. Does applicant have a sign posted in the customer reception / waiting area stating applicant assumes no liability for any items left inside vehicles left for service or repair? .....  Yes  No

10. What controls are in place for the keys? Describe. \_\_\_\_\_

11. Is a standard automotive work order used? .....  Yes  No

**UNDERWRITING INFORMATION (CONTINUED)**

**EXPLAIN ALL "YES" RESPONSES**

**Do You**

- 1. Have Commercial Auto insurance for all owned, non-owned and hired autos? .....  Yes  No
- 2. Have any dealer plates or transfer tags?.....  Yes  No
- 3. Have a dealer's license? .....  Yes  No
- 4. Have signs posted restricting customers from entering work areas? .....  Yes  No
- 5. Conduct structural alterations or frame straightening? .....  Yes  No  
If yes, complete Frame Straightening Supplemental Application, S320FRs.
- 6. Engage in any other operations? If yes, specify below .....  Yes  No
- 7. Engage in auto dismantling or salvage operations?.....  Yes  No
- 8. Engage in split rim work? .....  Yes  No
- 9. Have any security guards? .....  Yes  No  
Are they employees? .....  Yes  No  
Are they subcontractors? .....  Yes  No  
If they are subcontractors, do you obtain certificates of insurance? .....  Yes  No
- 10. Have guard dogs? .....  Yes  No  
If yes, are they confined during business hours?.....  Yes  No
- 11. Have underground storage tanks?.....  Yes  No
- 12. Install or repair trailer hitches?.....  Yes  No  
If yes, are they pre-manufactured? .....  Yes  No  
Will you custom fabricate and install trailer hitches?.....  Yes  No
- 13. Modify vehicles for performance, style or handling characteristics?.....  Yes  No
- 14. Own or operate tank trucks? .....  Yes  No
- 15. Rent, lease or loan vehicles, machinery or equipment to others? .....  Yes  No  
From others? .....  Yes  No
- 16. Repossess vehicles? .....  Yes  No
- 17. Sell any used parts? .....  Yes  No
- 18. Sell or distribute butane, propane or other liquefied gas? .....  Yes  No
- 19. Sell recaps?.....  Yes  No
- 20. Sell used tires? .....  Yes  No
- 21. Sponsor or own any race cars? .....  Yes  No
- 22. Sponsor sporting or social events? .....  Yes  No
- 23. Have any special hazards on premises (i.e. Cooking, flammables, woodworking, etc)? .....  Yes  No
- 24. Operate a tow truck service for hire? .....  Yes  No
- 25. Provide valet parking services? .....  Yes  No
- 26. Operate a storage / impound lot? .....  Yes  No

Explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**UNDERWRITING INFORMATION (CONTINUED)**

**INDICATE WHAT PERCENTAGE OF THE FOLLOWING OPERATIONS YOU PERFORM**

- 1. Auto mechanical repair ..... % Sales \_\_\_ % Repair
- 2. Auto parts sales ..... % Sales \_\_\_ % Repair
- 3. Boats, jet skis or other water craft ..... % Sales \_\_\_ % Repair
- 4. Body painting or repair ..... % Sales \_\_\_ % Repair
- 5. Brake work ..... % Sales \_\_\_ % Repair
- 6. Farm or heavy equipment ..... % Sales \_\_\_ % Repair
- 7. Gasoline or diesel sales ..... % Sales \_\_\_ % Repair
- 8. Foreign sports cars, classic autos, antique autos or fiberglass body autos ..... % Sales \_\_\_ % Repair
- 9. Grocery or liquor sales ..... % Sales \_\_\_ % Repair
- 10. Late model used automobiles and light trucks ..... % Sales \_\_\_ % Repair
- 11. Mobile homes, motor homes or other recreational vehicles ..... % Sales \_\_\_ % Repair
- 12. Motorcycles, ATV's etc. .... % Sales \_\_\_ % Repair
- 13. Trucks, tractors, trailers (Complete Truck & Heavy Truck Supplemental Application, S320TR) ... % Sales \_\_\_ % Repair
- 14. Vehicles where the frame or body is modified, e.g., van conversions, etc. .... % Sales \_\_\_ % Repair
- 15. Other \_\_\_\_\_ % Sales \_\_\_ % Repair

Remarks \_\_\_\_\_

**REQUESTED COVERAGE & LIMITS**

<b>COMMERCIAL GENERAL LIABILITY</b>	<b>GENERAL AGGREGATE LIMIT</b>	_____	<b>PER CLAIM DEDUCTIBLE</b>
	<b>PRODUCTS/COMPLETED OPERATIONS</b>	_____	\$ _____ BI
	<b>PERSONAL/ADVERTISING INJURY</b>	_____	\$ _____ PD
	<b>EACH OCCURRENCE</b>	_____	
	<b>DAMAGE TO PREMISES RENTED TO YOU</b>	_____	
	<b>PREMISES MEDICAL PAYMENTS</b>	_____	

<b>REPAIR &amp; SERVICE OPERATIONS LEGAL LIABILITY</b>	<b>Loc. 1</b>	<b>PER AUTO</b>	<b>PER LOCATION</b>	<b>DEDUCTIBLE</b>
	<b>SPECIFIED CAUSES OF LOSS</b>	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS
	<b>COLLISION</b>	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS

<b>REPAIR &amp; SERVICE OPERATIONS LEGAL LIABILITY</b>	<b>Loc. 2</b>	<b>PER AUTO</b>	<b>PER LOCATION</b>	<b>DEDUCTIBLE</b>
	<b>SPECIFIED CAUSES OF LOSS</b>	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS
	<b>COLLISION</b>	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS

<b>REPAIR &amp; SERVICE OPERATIONS LEGAL LIABILITY</b>	<b>Loc. 3</b>	<b>PER AUTO</b>	<b>PER LOCATION</b>	<b>DEDUCTIBLE</b>
	<b>SPECIFIED CAUSES OF LOSS</b>	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS
	<b>COLLISION</b>	\$ _____	\$ _____	\$ _____ PER AUTO \$ _____ MAX PER LOSS

<b>MISCELLANEOUS TOOLS – IM (VALUE OF \$1,500 OR LESS) \$1,000 DEDUCTIBLE</b>	<b>TOOL DESCRIPTION</b>	<b>LIMIT PER ITEM (MAXIMUM POLICY LIMIT: \$10,000)</b>
	<b>Attach a separate sheet, if needed.</b>	

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Producer's Signature

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Date

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Applicant's Signature

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Date