



Dump Questionnaire

This questionnaire is to be completed in conjunction with Acord 125, 127 and a state specific form 137.

Applicant Name: _____ **Date Completed:** _____

General Information

1. How long has current ownership been in place? _____

2. Percentage of trips of operation in the following radius categories:

0-50 _____ %	101-200 _____ %	301-500 _____ %
51-100 _____ %	201-300 _____ %	500-over _____ %

3. Check major cities where applicant makes **regular** trips:

- | | | | |
|--|---------------------------------------|--|---|
| <input type="checkbox"/> Atlanta | <input type="checkbox"/> Detroit | <input type="checkbox"/> Miami | <input type="checkbox"/> Pittsburgh |
| <input type="checkbox"/> Baltimore | <input type="checkbox"/> Hartford | <input type="checkbox"/> Milwaukee | <input type="checkbox"/> Portland |
| <input type="checkbox"/> Boston | <input type="checkbox"/> Houston | <input type="checkbox"/> Minneapolis | <input type="checkbox"/> Richmond |
| <input type="checkbox"/> Buffalo | <input type="checkbox"/> Indianapolis | <input type="checkbox"/> Nashville | <input type="checkbox"/> St. Louis |
| <input type="checkbox"/> Charlotte | <input type="checkbox"/> Jacksonville | <input type="checkbox"/> New Orleans | <input type="checkbox"/> Salt Lake City |
| <input type="checkbox"/> Chicago | <input type="checkbox"/> Kansas City | <input type="checkbox"/> New York City | <input type="checkbox"/> San Francisco |
| <input type="checkbox"/> Cincinnati | <input type="checkbox"/> Little Rock | <input type="checkbox"/> Oklahoma City | <input type="checkbox"/> Seattle |
| <input type="checkbox"/> Cleveland | <input type="checkbox"/> Los Angeles | <input type="checkbox"/> Omaha | <input type="checkbox"/> Tulsa |
| <input type="checkbox"/> Dallas/Ft Worth | <input type="checkbox"/> Louisville | <input type="checkbox"/> Phoenix | |
| <input type="checkbox"/> Denver | <input type="checkbox"/> Memphis | <input type="checkbox"/> Philadelphia | |

4. Indicate percentage of loads hauled:

- _____ % Aggregates (sand/gravel)
- _____ % Agriculture (seed/feed/grain)
- _____ % Bio-solid fertilizer
- _____ % Coal/Coke
- _____ % Construction debris
- _____ % Dirt
- _____ % Dirty dirt. If haul dirty dirt, please specify contaminants. _____
- _____ % Other non-hazardous dump commodities. Please specify: _____

5. Has applicant ever operated under another name? Yes No
If yes, what was the name and authority number of that operation? _____

6. Does the applicant allow non-employee passengers? Yes No

7. Does the applicant have Workers' Compensation Insurance in place? Yes No

If yes, current carrier name: _____

8. Do you transport hazardous materials, waste or substance which requires placarding? Yes No

If yes, complete the *Environmental Transport Questionnaire*.

9. Is trailer interchange legal liability required: Yes No

If yes: \$ _____ Maximum value per trailer

\$ _____ Average value per trailer

10. Does applicant own or operate any mobile equipment? Yes No

If yes, describe: _____

11. Number of vehicles insured:

_____ Current Year _____ 3rd Year Prior

_____ 1st Year Prior _____ 4th Year Prior

_____ 2nd Year Prior

12. Is coverage for Audio, Visual and Data Electronic Equipment requested? Yes No

If yes, what limit per vehicle is needed (up to \$10,000)? _____

13. Does applicant travel to Mexico or Canada? Yes No

If yes, provide details: _____

14. Please note that a minimum liability Property Damage deductible of \$500 is required on this class.

If a higher PD deductible is desired, please specify: _____

Hired / Non-Owned Auto

Complete only if Hired/Nonowned auto is requested.

Hired Auto Liability

1. Does applicant subhaul, lease or hire equipment from others? Yes No

If yes, provide the annual estimated cost of hire: Current year \$ _____ 2nd prior year \$ _____

1st prior year \$ _____ 3rd prior year \$ _____

If yes, is it: Permanently Leased Trip Leased

2. Is applicant named as additional insured? Yes No Limits required: \$ _____

3. If permanently leased, is it scheduled on this application? Yes No

4. If permanently leased, are autos hired with drivers? Yes No

5. If permanently leased, do you require non trucking coverage? Yes No

Hired Auto Physical Damage

1. Does applicant rent or use substitute equipment? Yes No

Nonowned Auto

1. Do you authorize personal auto usage for business purposes? Yes No

If yes, describe: _____

2. Do you require proof of insurance? Yes No

3. What are the minimum limits required? _____

Broaden Pollution Endorsement

1. Do you require Broadened Pollution Coverage? Yes No

Combined Deductible

1. Is the applicant requesting a combined deductible? Yes No