

## Information Request Form - Salvage Yard

Renewal Date:	Current Carrier:
Business Name:	
	ed to business/property & interest:
Type of Entity: Indiv	ridual Partnership Corporation LLC
Owners Name & %	
Business Address:	County:
City:	State Zip:
Within city limits?	
Email:	Website:
Fed ID#:  Descriptions of ope	# of Employees FT: PT: PT:
Descriptions of ope	
Annual Sales:	Yrs in business/experience:
Describe any other	revenue source:
<b>Property Covera</b>	ge:
Building #1	
Bldg Value:	Content value: Coverage Type: RC ACV Other
Deductible:	Co-Insurance:
Age**: Sc	q. Ft.: Construction Type: Condition:
Sprinkler: ☐ Yes	☐ No Smoke/Fire Alarm: ☐ Yes ☐ No Fire Hydrants: ☐ Yes ☐ No
Distance to hydran	t: Distance to Fire Stations:
# Fire Extinguishers	S How often inspected?
** If 20+ yrs old nee	
Roof:	Electrical: Plumbing: Heating:
Building #2	
Bldg Value:	Content value:Coverage Type: RC $\square$ ACV $\square$ Other $\square$
Deductible:	Co-Insurance:
Age**: S	q. Ft.: Construction Type: Condition:
Sprinkler: Yes	☐ No Smoke/Fire Alarm: ☐ Yes ☐ No Fire Hydrants: ☐ Yes ☐ No
Distance to hydran	nt: Distance to Fire Stations:
# Fire Extinguisher	How often inspected?
** If 20+ yrs old nee	ed updates:
Roof:	Electrical: Plumbing: Heating:
Active Security Sys	tem: Yes No With Who & Type:
Neighbors to the le	eft: Back: Across:
<b>Inventory</b> (inside	e buildings only) additional info needed:
Inland Marine:(H	Hilo, Loaders, Etc.):

eral Liability Limits: omobile/Garage: Liability Limits:	Medical:	Radius of operation:
of state exposure: Yes No		
es everyone driving company car have	e a personal auto policy in his	/her household? Y
o Who?		
t of vehicles: Year Make Model	Vin# Cost	New Comp Collison GV
nhook coverage?	es, vehicle & limit:	
List of <b>ALL</b> drivers(including family) that m		ealer plates
Name Birthda	Drivers License #	Personal Auto Policy:
		Yes No
		Yes O No
Il drivers must be reported to company <b>prior</b> to driving		Yes No
	Renewal date:	Yes No
orkers' Compensation: nployers Liability Limits:	Renewal date:	
orkers' Compensation:  nployers Liability Limits:  urrent Carrier:  urrent Premium:		E-mod:
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forkers' Compensation: Imployers Liability Limits: Incrent Carrier: Incrent Premium: Inckage: Include Auto: Includ	# of employees:  Retention:  Yes \( \) No \( \) Limit:	E-mod: Other:

(MUST have 3 years loss history from current carrier to bind coverage.)

## **Auto Recyclers Supplemental Questionnaire**

U-pull it? Yes No If yes, % of sales from U-pull it?
Total Annual Sales: % from Used Parts: New Parts: Towing: Auto Repair: Scrap (cars):
Scrap (other): Re builder Sales: Engine/Trans. rebuilding: Used Cars: Other:
# of dealer plates: # of transfer plates: # vehicles sold: Are vehicles sold as is? Yes No
Is any crushing being performed by insured? Yes No Are vehicles stacked in yard? Yes No How many?
If crushing is performed by a contractor, are certificates of insurance obtained? OYes ONo
Do wrecked autos arrive by insured's vehicles? Ores One What %?
Do you haul salvaged vehicles away from the yard? Ores One How many vehicles are stacked?
How are vehicles secured?
Does insured do any back hauling of other commodities ? OYes ONo If yes, describe:
Does insured perform any welding/cutting?  Ores  No
Where is it done and what controls are in place? (ex: distance from flammables)
Are cutting/welding tanks stored upright and properly secured? OYes ONo
Are flammable liquids removed from autos prior to welding? OYes ONo
Does insured have a doc. fire watch program, including monitoring/stopping 30 minutes prior to close? OYes ONo
Distance from combustibles to any welding &/or cutting operation?
Are flammable liquids removed from autos immediately? Ores Ono Outside building? Ores Ono Describe:
Do you have a gas caddy/buggy? OYes ONo Are tanks purged and plugged? OYes ONo
Describe use & storage of gas & other flammables:
Are all flammables stored in UL approved containers/cabinets? OYes ONo
Do you have a spill response kit including: Absorbent socks, pads & pillows? OYes ONo Drip pans? OYes ONo
Oil dry? Ores One Broom/shovel? Ores One Mop & bucket? Ores One Disposal bags? Ores One
Safety goggles?  Yes  No Nitride gloves? Yes  No
Does insured clean parts? Yes No If yes, is the solution: Water based Solvent based
Are certificates of insurance obtained from firms disposing of hazardous material? OYes ONo
Is the yard completely fenced? Yes No Height & construction type of fence:
Are customers allowed in the yard? Yes No Are they always accompanied by an employee? Yes No
Are customers allowed to remove parts?  Yes  No
Describe aisle space in yard:
Describe weed control:
Are there any dogs on the premises? Ores One If yes, what breed?
If yes, how are they contained during business hours?
Are good housing practices observed?
Are all buildings in good repair? Yes No If no, describe:
Are walkways leading to/from insured location free of obstruction? Ores One Are floor surfaces even? Ores One
Are floor areas free from obstruction? Ores Ono Are premises free from hazardous conditions? Ores Ono
Waste oil burner?
Are all tires stored at least 200 feet away from all buildings? Yes No # of loose tires on property?
How are tires stored? (racks, barrel, stacked, other)?

How often tires disposed of? Do you have a documented inspection process for	r used tire sales? Yes No						
Do you install tires? Yes No Visual inspection of used tires? Yes No							
Tires labeled/sorted during inspection? $\bigcirc$ Yes $\bigcirc$ No Records/receipts of tire sales? $\bigcirc$ Yes $\bigcirc$ No							
Disclaimer for used tire sales to customers? $\bigcirc$ Yes $\bigcirc$ No Do you sell tires over 7 years old? $\bigcirc$ Yes	○No						
Do you sell used tires with minimum tread depth of 1/16th inch?  Yes  No							
Are parts quality checked for flaws prior to sale?  OYes  No							
Do you want coverage of used parts inventory (inside building only)?  Ores ONO Limit?							
Towing for hire?  Yes No Repo. for hire? Yes No							
Contracts with municipalities?  Yes  No If yes, provide details of contract:							
Roadside service?  Yes  No Operate in a rural area?  Yes  No							
Where are vehicles towed to? If yard, are they separate fo	r dismantling? Yes No						
Auto storage on premises (other than towing)? Yes No Any customer autos on premises?	Yes O No						
Repair - brake work done? Yes No If yes, new brakes only? Yes No							
Are you a Certified Mechanic? Yes No Do you modify and/or rebuild parts? Yes No							
Do you dismantle farm/industrial machinery? Yes No Do you dismantle and/or store transfo	ormers? OYes ONo						
Do you rent/lease any autos, trailers, tractors, equipment or other tools? Yes No							
Does Management verify prior employment? Yes No							
Does Management verify MVR's prior to hiring and annually after that? OYes ONo							
Does Management have a minimum experience requirement?  Yes No							
Does Management have formal employee training program? Yes No							
Does Management provide well maintained equipment?  Yes No							
Does Management provide safe working conditions? Yes No							
Does Management comply w/insurance recommendations?  Yes No							
Describe handling of waste/fluids/chemicals:							
Do you have a formal safety program in place (i.e., monthly meetings, safety updates, safety procedur	es posted? Yes No						
Have there been any EPL claims, suits or complaints or any pending EPL issues against insured and/or	officers? OYes ONo						
Any officers have any knowledge of any act error or omission which could result in EPL claim/suite, et	□. ○Yes ○ No						
Does insured own/operate any other businesses? Yes No							
If yes:							
How many officers? Active?							
List of <b>ALL</b> owners and employees:							
Name Payroll Job Duties Fu	II Time?:						
OY6							
OY.							
OY OY							
	es O No						
	es No						

## **Self Service Supplemental Application**

re customers charged a fee? Yes No Fee? Are customers required to sign waiver? Yes No (provide copy	′)
Are customers under 18 permitted? Yes No Are customers required to show ID? Yes No	
Are customers allowed to remove vehicles from under vehicles? $\bigcirc$ Yes $\bigcirc$ No	
xplain how vehicles are stored (Stands):	
Vhat type of parts are allowed to be removed under vehicles?:	
re all escorted customers required to wear safety glasses & reflective vest? Yes No	
re customer tool boxes checked prior to entering & exiting yard? Yes No	
Do you loan tools? Ores Ono Are jacks removed from all vehicles? Ores Ono	
Are customers allowed to bring in Jacks or heavy tools?  Yes  No	
Are customers allowed to remove large parts? Yes No If so, what?	
s employee located in the yard at all times overseeing removal of parts? Yes No	
Are fluids drained from all vehicles prior to entering yard? $\bigcirc$ Yes $\bigcirc$ No $\bigcirc$ Are forklifts operated during business hours? $\bigcirc$ Yes $\bigcirc$ No	
When operating forklifts employee escorted to clear obstacles & customers? OYes ONo	
Are aisles roped off from customer access?	
Are customers allowed to operate any moving equipment, torches, etc.? Yes No	
Are yard rules clearly posted? Yes No	
Do you keep a daily log of all customers allowed in yard?	
Do you have a written first aid/injury plan in place? Yes O No	
Are customers allowed to wear sandals or open toe shoes? Yes No	
Before closing, do employees walk the yard to make sure everyone is gone? $\bigcirc$ Yes $\bigcirc$ No	
CODY OF CURRENT DECLARATION BACE (BOLICY) WOLLD DE HELDELL	
COPY OF CURRENT DECLARATION PAGE (POLICY) WOULD BE HELPFUL	
Addition information to	
help us provide you the	
best possible quote	