



ZURICH®

# Renewal Questionnaire – Public Auto

Applicant Name: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Expiring Policy Number: \_\_\_\_\_ Effective Date: \_\_\_\_\_ to \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Have there been any ownership changes?  Yes  No

If yes, describe: \_\_\_\_\_

List all states you operate in: \_\_\_\_\_

Complete for all applicable operations. (Must total 100%)

_____ % Airport Transportation	_____ % Farm Labor Transport	_____ % Senior Transportation
_____ % Athlete/Entertainer Transportation	_____ % Gambling/Casino Transportation	_____ % Sightseeing Bus
_____ % Ambulance	_____ % Hotel/Motel Transportation	_____ % Social Service
_____ % Black Car	_____ % Inter City Bus	_____ % Taxi
_____ % Charter Bus	_____ % Limousine	_____ % Urban Bus
_____ % Church Bus	_____ % Non-Emergency Transportation	_____ % Van Pools
_____ % Contracted Child Transport	_____ % Parking Shuttle	_____ % Youth Organization
_____ % Courtesy	_____ % Prisoner/Juvenile Transport	_____ % Other – Details:
_____ % Day Care	_____ % Railroad Crew Transport	_____
_____ % Employee Transportation	_____ % School Bus	_____

If five or more units, provide hard copy, currently valued, loss runs for three previous completed policy terms.

Describe any changes in your operation since the original application: \_\_\_\_\_  
\_\_\_\_\_

### Hired/Nonowned Auto

Complete only if Hired/Nonowned auto is requested.

### Hired Auto Liability

Provide the Estimated Cost of Hire: Current Year \$ \_\_\_\_\_ 1<sup>st</sup> Prior Year \$ \_\_\_\_\_

### Non-Owned Auto

Number of non-owned autos used in your business: \_\_\_\_\_ Daily \_\_\_\_\_ Weekly \_\_\_\_\_ Monthly

Number of employees: \_\_\_\_\_

Provide a list of drivers that includes name, date of birth, years experience, driver's license number, state of issuance and date of hire or complete the following table.

Name	Date of Birth	License Number	State	# of years Driving Like Equipment	Date of Hire

Provide a list of equipment that includes model year, trade name, type, VIN, GVW/GCW, value, radius and AI/LP or complete the following table.

Model Year	Trade Name	Vehicle Type*	VIN	Seating Capacity	<input type="checkbox"/> Stated Value Or <input type="checkbox"/> OCN	Radius
					\$	
AI/LP:					\$	
AI/LP:					\$	
AI/LP:					\$	
AI/LP:					\$	
AI/LP:					\$	

\*S=Sedan, SUV=Sport Utility Vehicle, V=Van, ST=Stretched, T=Trolley, B=Bus, LB=Luxury Bus, OC=Overnight Coach, D=Double Decker, O=Other