

- Western World Insurance Company
- Tudor Insurance Company
- Stratford Insurance Company

Supplemental  
Application  
For  
**Hired and Nonowned Auto**

Applicant's Name: \_\_\_\_\_

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

Applicant's Web Site Address: \_\_\_\_\_

1. Why is Hired and Non-Owned Auto coverage being requested? \_\_\_\_\_
  
2. Any owned or long term Leased Commercial Autos?  Yes  No  
 If yes, types of autos leased? \_\_\_\_\_  
 Who is auto insurance carrier? \_\_\_\_\_
3. Number of Employees: \_\_\_\_\_
4. Number of Officers and Partners: \_\_\_\_\_
5. Number of Volunteers: \_\_\_\_\_
6. Any autos rented on a temporary basis?  Yes  No
  - a) If yes, from whom? \_\_\_\_\_
  - b) Types of autos you hire? \_\_\_\_\_
  - c) Duration of use? \_\_\_\_\_
  - d) Frequency? \_\_\_\_\_
  - e) Is insurance purchased from rental company? \_\_\_\_\_
7. Does Applicant require any employees to use their personal autos to conduct Applicant's business?  Yes  No
8. How often are non-owned autos used in Applicant's business?  Daily  Weekly  Monthly  
 Estimated number of hours per month \_\_\_\_\_  
 What is estimated annual mileage of non-owned autos? \_\_\_\_\_ Miles  
 What is the maximum distance that a non-owned auto may be driven from your premises? \_\_\_\_\_ Miles
9. Total number of non-owned autos used in Applicant's business? \_\_\_\_\_
10. Does the Applicant require employees and volunteers to have their own auto insurance?  Yes  No  
 If yes, what are the minimum limits required? \_\_\_\_\_  
 Does the Applicant require evidence of insurance?  Yes  No  
 How often is this updated? \_\_\_\_\_
11. Any transportation of clients to or from your premises or to and from appointments?  Yes  No
12. Will you use Non-Owned autos other than those owned by your employees?  Yes  No  
 If yes, describe: \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_