HORNER INSURANCE SERVICES

REQUEST FOR PREMIUM INDICATION
MEMPHIS, TN FAX 901- 684- 4565 or 877- 325- 8367
BRANDON, MS FAX 601-922-9044

APPLICANT (COMPANY NAME) & ADDRESS	INSURED'S AGENT & AGENCY	DATE

PRINCIPAL(S)/OWNER(S)	MC #	DOT#	NON-TRK LEASED TO:

TARGET PRICING	INCUMBENT AGENT? YES ☐ NO ☐

DOES INSURED:	HAUL SAND & GRAVEL? YES ☐ NO ☐
HAUL DOUBLE TRAILERS? YES ☐ NO ☐	HAUL FLATBED MATERIALS? YES ☐ NO ☐
HAUL TRIPLE TRAILERS? YES ☐ NO ☐	COMMODITIES HAULED:
HAUL HAZARDOUS MATERIALS? YES ☐ NO ☐	REEFER? YES ☐ NO ☐

EQUIPMENT (ATTACH SEPARATE LIST IF NECESSARY)

TYPE COV.	VEHICLES	RADIUS	STATED AMOUNT	DEDUCTIBLE	LIMITS	CARGO LIMIT
TRUCKERS GENERAL LIABLILITY						

DESTINATION CITIES OR FIXED ROUTE DESCRIPTION & TIME WITH SHIPPER:

DRIVER INFORMATION

NAME	DATE OF BIRTH	# YEARS EXP. WITH HEAVY EQUIP.	DRIVING RECORD PAST THREE YEARS

OPERATION HISTORY

YEAR	# OF UNITS	ANNUAL REVENUE	ANNUAL MILEAGE
PROJECTED			
CURRENT			
1st PRIOR			
2nd PRIOR			

 # OF COMPLETE YEARS OF CONTINUIOUS LIABILITY COVERAGE?

L - Liability PD – Physical Damage
C – Cargo TGL – Truckers General Liability

LOSS INFORMATION

Carrier	Date	Type Loss	Paid	Reserve	Details

WAS PREVIOUS COVERAGE CANCELLED? YES ☐ NO ☐ OR NON-RENEWED? YES ☐ NO ☐ REASON?

% OF LOADS SECURED THROUGH FREIGHT BROKERS %	COMMENTS:
% OF LOADS TO REGULAR OR FIXED DESTINATIONS %	

*******THIS IS NOT A BINDER*******

(Rev. 7-2009)