



Erie Insurance

COMMERCIAL DRIVER QUESTIONNAIRE #10

1. POLICYHOLDER'S NAME: Trailer Tech Parts & Service Inc. POLICY NUMBER: Q011980083H7. AGENT NO.: AA7369. AGENT NAME: Unruh Ins Agcy Inc. ADDRESS: 11 Site Rd, Leola PA 17540. DRIVER'S FIRST NAME, MIDDLE INITIAL, LAST NAME, LICENSE NUMBER, STATE PRIOR STATE AND OPERATOR'S NUMBER IF LESS THAN 3 YEARS, DATE FIRST LICENSED OR DATE OF PERMIT, DATE OF BIRTH, SOCIAL SECURITY NUMBER, COMMERCIAL DRIVER'S LICENSE?, DATE HIRED, JOB TITLE, DRIVER'S AUTO INSURANCE COMPANY, HOME PHONE NUMBER.

3. WARNING: An incorrect answer, intentional or not, to any question below may jeopardize continuing coverage. If the answers to any of the following are "Yes," give details in space provided. Has driver: (a) Had any auto insurance refused, cancelled or expired in the past 5 years? (b) Been required to file evidence of financial responsibility in the past 5 years? (c) Had their driver's license or driving privileges revoked or suspended in the past 5 years? (d) Received a ticket for speeding, a PBJ (PJC in NC), or any other vehicle code violation within the past 5 years? (e) Ever receive any felony convictions? (f) Had a physical or mental impairment or disability or other medical infirmity? (g) Had any comprehensive losses (deer, fire, glass breakage, theft, etc.) in the past 5 years? (h) While driving any motor vehicle, commercial or personal, been involved in an accident during the past 5 years? (i) FOR MD ONLY: Refused to submit to a chemical test or been given probation before judgment for an alcohol violation in the past 3 years?

Details for "Yes" answers:

4. List driver's previous experience driving types of commercial vehicles insured and any safety courses completed. 5. Does driver take home any company autos on a regular basis? 6. Does driver have any restrictions on license? 7. Were MVRs/GLUEs ordered on any/all drivers? 8. OTHER PERTINENT INFORMATION

AGENT: Do you consider this an acceptable risk? Agent's Signature

PLEASE READ	
DC APPLICANT(S)	WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.
NY APPLICANT(S) (Fraud Warning)	Any person who knowingly and with intent to defraud any insurance company or other person files an application for commercial insurance or a statement of claim for any commercial or personal insurance benefits containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, and any person who, in connection with such application or claim, knowingly makes or knowingly assists, abets, solicits or conspires with another to make a false report of the theft, destruction, damage or conversion of any motor vehicle to a law enforcement agency, the department of motor vehicles or an insurance company, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the value of the subject motor vehicle or stated claim for each violation.
OHIO APPLICANT(S)	Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.
PA APPLICANT(S)	Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties.
IN & VA APPLICANT(S)	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.
WV APPLICANT(S)	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
OTHER APPLICANT(S)	Any person who knowingly files an application containing any false, incomplete or misleading information, may be subject to criminal and/or civil penalties.
COMMERCIAL DRIVER SIGNATURE	I certify that I have given true and complete answers to the above questions. You have my permission to obtain a copy of my motor vehicle driving record for purposes of determining my eligibility for coverage under this policy. DRIVER'S SIGNATURE Date
POLICYHOLDER SIGNATURE	POLICYHOLDER'S (OR AUTHORIZED REPRESENTATIVE'S) SIGNATURE Date Title