



P.O. Box 650 • 57 Parker Rd. • Barre, VT 05641 • 800-548-4301 • www.neee.com

## AUTO DEALERS AND GARAGE APPLICATION

Proposed Effective Date: \_\_\_\_\_  
Proposed Expiration Date: \_\_\_\_\_

Producer: Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # \_\_\_\_\_

Applicant Name and Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- ☐ Individual  
☐ Partnership  
☐ Corporation  
☐ Joint Venture  
☐ Limited Liability Corp.

Contact & Email: \_\_\_\_\_

Business Phone: \_\_\_\_\_  
Years in Business: \_\_\_\_\_

Website Address: \_\_\_\_\_  
Years of Experience: \_\_\_\_\_

Locations: ☐ Same as above

- |          |          |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

List any states operations are conducted outside locations scheduled: \_\_\_\_\_

### UNDERWRITING INFORMATION

- |                                                                                                                                                                                                       | Yes                      | No                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| 1. Are you involved in auto leasing or rental operations?                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are you involved in importing autos?                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you sell, rent or loan Dealer or Transporter plates to others?                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do you allow overnight test drives?                                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are you involved in public or livery passenger conveyance or on-demand delivery/courier services?                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are you involved in any racing, race car preparations/repair or race sponsorship?                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Do you have any Liquefied Petroleum Gas (LPG) exposures in your operations?<br>If yes, do you abide by the NFPA 58 - Liquefied Petroleum Gas Code?                                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are jacks and car lifts stored in a protected area after work hours?                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are operations conducted from a personal residence?<br>Do you store autos held for sale at the residence? If yes, include in locations above.<br>Do you have a homeowners/renters policy in place? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are you involved in any operations under a different entity?<br>Provide name and details: _____                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |

### PRIOR CARRIER AND LOSS INFORMATION

☐ No Prior Carrier ☐ No Prior Losses

Prior Carrier	Policy Yr.	Description of Loss	Amount Paid	Amount Reserved

### EMPLOYEE AND HOUSEHOLD MEMBER INFORMATION

Full Name and Date of Birth	Driver's License #	State	FT or PT	Class (See Below)	# Acc/Viol (past 3 years)	Has Personal Auto policy?

#### Furnished an Auto for Personal Use

Class A - principal or employee  
Class B - non-employees without a personal auto policy in place  
Class C - non-employees with a personal auto policy in place  
Have all employees and household members been disclosed? \_\_\_\_\_

#### Not Furnished an Auto for Personal Use

Class D - auto salespeople, contract drivers or valet parkers  
Class E - mechanics or lot persons  
Class F - clerical or sales counter duties  
\_\_\_\_\_

**NATURE OF BUSINESS (INDICATE PERCENTAGE OF EACH)**

Total of all percentages on this page should equal 100%

*\*Supplement Required***SALES**

Dealer License Number: \_\_\_\_\_

\_\_\_\_\_% Antique or Classic Auto Dealer  
\_\_\_\_\_% ATV, UTV, Dirt Bike or Snowmobile Dealer\*  
\_\_\_\_\_% Auto Auction  
\_\_\_\_\_% Auto Dealer - PPV and Light/Medium Truck - Franchise  
\_\_\_\_\_% Auto Dealer - PPV and Light/Medium Truck - Nonfranchise - Retail  
\_\_\_\_\_% Boat or Jet Ski Dealer  
\_\_\_\_\_% Bus Dealer\*  
\_\_\_\_\_% Camper, Fifth Wheel or Travel Trailer Dealer\*  
\_\_\_\_\_% Consigned Autos - *Include consignment agreement*  
\_\_\_\_\_% Contractor's Equipment Dealer\*  
\_\_\_\_\_% Emergency Vehicle Dealer\*  
\_\_\_\_\_% Farm Equipment Dealer\*  
\_\_\_\_\_% Golf Cart Dealer  
\_\_\_\_\_% Heavy Truck Dealer\*

\_\_\_\_\_% Imported Autos  
\_\_\_\_\_% Logging Equipment Dealer\*  
\_\_\_\_\_% Mining Equipment Dealer\*  
\_\_\_\_\_% Mobile Home Dealer  
\_\_\_\_\_% Motorcycle Dealer\*  
\_\_\_\_\_% Race Car Dealer  
\_\_\_\_\_% RV Dealer\*  
\_\_\_\_\_% Salvage Titled Autos  
\_\_\_\_\_% Semi Trailer Dealer\*  
\_\_\_\_\_% Tank or Tank Truck Dealer\*  
\_\_\_\_\_% Trailer Dealer - Utility/Livestock  
\_\_\_\_\_% Wholesale Auto Dealer, Broker, or Internet Sales  
*Miles from personal residence to operation location:* \_\_\_\_\_

**PARKING AND STORAGE**

\_\_\_\_\_% Valet Parking  
\_\_\_\_\_% Designated Locations - No Street Driving or Parking\*  
\_\_\_\_\_% Designated Locations - Including Street Driving or Parking\*  
\_\_\_\_\_% Blanket Basis - Including Special Events\*

\_\_\_\_\_% Impound Yard  
\_\_\_\_\_% Long Term Auto Storage  
\_\_\_\_\_% Parking Facilities - No Valet  
\_\_\_\_\_% RV Storage  
\_\_\_\_\_% Watercraft Storage

**SERVICE OR REPAIR**

\_\_\_\_\_% Airbag Installation or Repair  
\_\_\_\_\_% Alarm Installation or Repair  
\_\_\_\_\_% Antique or Classic Auto Repair  
\_\_\_\_\_% ATV, UTV, Dirt Bike or Snowmobile Repair\*  
\_\_\_\_\_% Auto Dismantling  
\_\_\_\_\_% Auto Maintenance and Repair  
\_\_\_\_\_% Autonomous/Self-Driving Autos  
\_\_\_\_\_% *What level of automation (SAE Level 0-5)?* \_\_\_\_\_  
\_\_\_\_\_% Auto Parts and Accessory Sales *Receipts:* \_\_\_\_\_  
\_\_\_\_\_% Auto Pawning  
\_\_\_\_\_% Bedliner Installation  
\_\_\_\_\_% Boat or Jet Ski Repair  
\_\_\_\_\_% Body Shop & Painting with UL Approved Booth  
\_\_\_\_\_% Body Shop & Painting without UL Approved Booth  
\_\_\_\_\_% *Explosion Proof Lighting/Adequate Ventilation Present?* \_\_\_\_\_  
\_\_\_\_\_% Brake Replacement or Repair  
\_\_\_\_\_% Bus Repair\*  
\_\_\_\_\_% Camper, Fifth Wheel or Travel Trailer Repair\*  
\_\_\_\_\_% Car Wash - Full Service  
\_\_\_\_\_% Car Wash - Self Service  
\_\_\_\_\_% Contractor's Equipment Repair\*  
\_\_\_\_\_% Convenience Store  
\_\_\_\_\_% Conversion Shop  
\_\_\_\_\_% Detailer  
\_\_\_\_\_% Drive-Away Contractor or Concierge  
\_\_\_\_\_% Emergency Vehicle Repair\*  
\_\_\_\_\_% Farm Equipment Repair\*  
\_\_\_\_\_% Frame Straightening  
\_\_\_\_\_% Frame Cutting, Stretching, Shortening  
\_\_\_\_\_% Gasoline Station - Full Service  
\_\_\_\_\_% Other: \_\_\_\_\_

\_\_\_\_\_% Gasoline Station - Self Service  
\_\_\_\_\_% Golf Cart Repair  
\_\_\_\_\_% GPS Installation  
\_\_\_\_\_% Heavy Truck Repair\*  
\_\_\_\_\_% High Performance Shop  
\_\_\_\_\_% Ignition Interlock  
\_\_\_\_\_% Inspection Station  
\_\_\_\_\_% Lift Kit Install *Any over 6"?* \_\_\_\_\_  
\_\_\_\_\_% Logging Equipment Repair\*  
\_\_\_\_\_% Machine Shop  
\_\_\_\_\_% Manufacturing or Assembly - Including Kit Cars  
\_\_\_\_\_% Mining Equipment Repair\*  
\_\_\_\_\_% Mobile Auto Repair  
\_\_\_\_\_% Motorcycle Repair\*  
\_\_\_\_\_% Oil/Lube Shop  
\_\_\_\_\_% Refrigeration Unit Servicing  
\_\_\_\_\_% Repossession - For-Hire  
\_\_\_\_\_% RV Repair\*  
\_\_\_\_\_% Salvage Yard  
\_\_\_\_\_% Semi Trailer Repair\*  
\_\_\_\_\_% Stereo Installation  
\_\_\_\_\_% Tank or Tank Truck Repair\*  
\_\_\_\_\_% Tire or Rim Dealer or Repair  
\_\_\_\_\_% Trailer Repair - Utility/Livestock  
\_\_\_\_\_% Upholstery  
\_\_\_\_\_% Window Tinting  
\_\_\_\_\_% Windshield Replacement/Repair  
\_\_\_\_\_% Wrapping of Autos  
\_\_\_\_\_% Wrecker For-Hire  
\_\_\_\_\_% Wrecker Not-For-Hire

LIABILITY COVERAGE					
Symbol(s):	<input type="checkbox"/> 21 - Any Auto <input type="checkbox"/> 22 - Any Owned Auto <input type="checkbox"/> 28 - Hired Autos <input type="checkbox"/> 29 - Non-Owned Autos	Deductible: _____	Pickup & Delivery Distance: (Radius of Operations)	<input type="checkbox"/> 0-300 Miles <input type="checkbox"/> Over 300 Miles	
Covered Autos Liability General Liability - Bodily Injury & Property Damage Damage to Premises Rented to You Personal & Advertising Injury Liability		_____ Limit Each Accident _____ Limit Each Accident _____ Limit Any One Premises _____ Any One Person or Organization _____ General Liability Aggregate _____ Products & Work You Performed Aggregate			
GARAGEKEEPERS COVERAGE					
Coverage:	<input type="checkbox"/> Specified Causes <input type="checkbox"/> Comprehensive <input type="checkbox"/> Collision	Per Auto Limit: _____	Deductible: _____		
Coverage Basis:	<input type="checkbox"/> Legal Liability <input type="checkbox"/> Direct Excess <input type="checkbox"/> Direct Primary	Lot Limit:    Loc. 1 _____ Loc. 2 _____ Loc. 3 _____ Loc. 4 _____	Loc. 5 _____ Loc. 6 _____ Loc. 7 _____ Loc. 8 _____		
DEALER'S PHYSICAL DAMAGE COVERAGE					
Coverage:	<input type="checkbox"/> Specified Causes <input type="checkbox"/> Comprehensive <input type="checkbox"/> Collision <input type="checkbox"/> False Pretense - Are customers accompanied on test drives? _____	Per Auto Limit: _____	Deductible: _____	Lot Protection <i>Building</i> Definitions: <i>Standard Lot (6' metal cyclone or equivalent fence)</i> <i>Non-Standard Lot (fencing other than standard)</i> <i>Unprotected (no fencing around entire lot)</i>	
				If Lot Protection is Building:	
Loc:	Lot Protection:	Lot Limit:	Average Number of autos held for sale:	Is the building sprinklered?	Is there a Central Station Fire Alarm?
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____
UNINSURED, UNDERINSURED AND PERSONAL INJURY PROTECTION					
<input type="checkbox"/> Uninsured Motorists Limit: <input type="checkbox"/> Underinsured Motorists Limit: <input type="checkbox"/> Personal Injury Protection Limit: <input type="checkbox"/> Virginia Medical Expense & Income Loss Limit:	_____ _____ _____ _____	Number of Dealer Plates _____			
OPTIONAL COVERAGES					
<input type="checkbox"/> Locations & Operations Medical Payments Limit Per Person: _____ <input type="checkbox"/> Auto Medical Payments Limit Per Person: _____ <input type="checkbox"/> Broad Form Products <input type="checkbox"/> Drive Other Car <input type="checkbox"/> Employee Benefits Liability <input type="checkbox"/> Employers Liability Insurance (Stop Gap) - only available in North Dakota, Ohio, Washington and Wyoming	<input type="checkbox"/> \$100,000 Each Accident - \$100,000 Each Employee - \$200,000 Aggregate <input type="checkbox"/> \$300,000 Each Accident - \$300,000 Each Employee - \$600,000 Aggregate <input type="checkbox"/> \$500,000 Each Accident - \$500,000 Each Employee - \$1,000,000 Aggregate <input type="checkbox"/> \$1,000,000 Each Accident - \$1,000,000 Each Employee - \$2,000,000 Aggregate	Auto Dealers Acts, Errors or Omissions <input type="checkbox"/> Truth in Lending <input type="checkbox"/> Odometer <input type="checkbox"/> Insurance Agents or Brokers <input type="checkbox"/> Title			

**ADDITIONAL INSURED OPTIONS**☐ Additional Insured - Owner of Leased or Rented Land or Premises (AGP-023)☐ Additional Insured - Lessor of Leased Equipment (AGP-019)☐ Additional Insured - Grantor of Franchise (AGP-020)☐ Designated Insured (AGP-018) - *Describe Interest*☐ Waiver of Transfer of Rights of Recovery Against Others to Us (AGP-035)☐ Blanket Waiver of Transfer of Rights of Recovery Against Others to Us (AGP-044)☐ Primary and Noncontributory (AGP-007) *Include a copy of the contract requiring this coverage***SCHEDULED AUTOS - Available in AL, CA, MS, MO, OH, SD, TN, TX, WA, WY**Coverage(s): ☐ Liability ☐ Specified Causes ☐ Comprehensive ☐ Collision

Physical Damage Deductible: \_\_\_\_\_ Are Scheduled Autos owned by this entity? \_\_\_\_\_

Year/Make/Model	GVW	VIN	Vehicle Value	Used for Towing (Y/N)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

If trailers are scheduled above, what is the maximum numbers of autos they can transport? \_\_\_\_\_

What is the maximum distance traveled by scheduled autos? \_\_\_\_\_

Comments: \_\_\_\_\_

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

\_\_\_\_\_  
**PRODUCER'S SIGNATURE**\_\_\_\_\_  
**DATE**\_\_\_\_\_  
**APPLICANT'S SIGNATURE**\_\_\_\_\_  
**DATE**