

Business Questionnaire

1. How many years transportation experience driving what type vehicles. Provide details to include prior employers/dates. _____

2. How many years experience managing like business? Provide details to include prior employers/dates. _____

3. Other management experience. _____

4. Other experienced operators which will be relied upon for assistance. _____

5. What marketing techniques will be used to build business? _____
Yellow Pages? _____
Referrals? _____
Contract? _____
Other: _____
6. Any special contractual arrangements to maintain steady flow of income? _____

7. If startup operation - attach pro-forma financial information.
Otherwise -- attach current financial statement. _____

NOTE TO AGENTS:

This form must be signed by the insured.

Insured's Signature

Date