

**New Venture Profile**

Named Insured \_\_\_\_\_ Effective date of new venture \_\_\_\_\_

How long have you been driving buses, courtesy vans, and/or tractor-trailers? \_\_\_\_\_

Are you for hire? Yes or No      If yes, please describe your operation \_\_\_\_\_

Who was your previous employer? \_\_\_\_\_ How Long? \_\_\_\_\_

Date of first chauffeurs or CDL \_\_\_\_\_

Driving experience on units over 10,000 GVW \_\_\_\_\_

What product were you previously hauling? \_\_\_\_\_

What was your route? \_\_\_\_\_

How many accidents have you been involved in the last 5 years? \_\_\_\_\_  
Details of accident: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Attach a copy of all MVRs to the application**

What will you be hauling? \_\_\_\_\_ For whom? \_\_\_\_\_

Who is financing the new operation? \_\_\_\_\_

Are you applying for State or federal ICC authority? \_\_\_\_ Yes \_\_\_\_ No  
Please provide type & # \_\_\_\_\_

Do you expect to increase the number of vehicles within on year? \_\_\_\_\_  
If yes, how many? \_\_\_\_\_

Describe your hiring practices: \_\_\_\_\_

\_\_\_\_\_

Will you allow trip leasing? \_\_\_\_ Yes \_\_\_\_ No Will you use team drivers? \_\_\_\_ Yes \_\_\_\_ No  
Are family members traveling with you? \_\_\_\_ Yes \_\_\_\_ No

Describe your safety and vehicle maintenance program: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What are the anticipated gross receipts? \_\_\_\_\_ Total mileage \_\_\_\_\_

Insured Signature: \_\_\_\_\_

Date: \_\_\_\_\_