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Contingent Motor Truck Cargo Application

Section 1 – General Information

Name of Insured: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email / Website address: _____

Date business established: _____

Please list any commonly owned companies _____

Section 2 – Operation Information

Type of Operation: Freight Brokerage ___ Freight Forwarding ___

DOT # _____

Section 3 - Type of Freight Managed: (please be specific)

Type of cargo	Ave. Value per load	Max. Value per load	% of total loads
Machinery			
Tobacco			
Produce			
Chilled Food			
Frozen Food			
Building Materials			
Seafood			
Boats			
Containers			
Used Autos			
New/High Value Autos			

The following interests are **excluded** under the basic policy form: Accounts, bills, debts, evidence of debt, letters of credit, passports, documents, railroad or other tickets, notes, money, securities, currency, bullion, precious stones, jewelry &/or other similar valuable articles, paintings, statuary and other works of art, manuscripts, mechanical drawings, live animals, tobacco, cigars, cigarettes, non-ferrous metal in scrap or ingot form including Copper in any form, furs, alcohol, liquor, beer, wine, garments (defined as: items of clothing, including innerwear and outerwear, footwear, shoes, boots, gloves, hats, and the like), seafood unless canned, and electronics (defined as: all items of consumer and commercial electrical appliances and instruments including but not limited to radios, stereos, televisions, computers, computer software, hard drives, chips, modems, monitors, cameras, facsimile machines, photocopiers, VCRs, hi-fis, CD players and the like and pharmaceutical products, Tires.

Are any of the above excluded Commodities managed by the applicant? Yes ___ No ___ If yes, please describe: _____

Are any Hazardous Commodities handled by the applicant? Yes ___ No ___ If yes, please describe: _____

Section 4 – Insurance Information

What steps do you take to verify the Motor Carriers you do business with? _____

Estimated Gross Receipts for upcoming year: \$ _____

Gross Receipts 3 prior Year: \$ _____
\$ _____
\$ _____

Have the insured ever have coverage of this type cancelled or non-renewed? _____ If Yes, Explain:

Limits of Coverage Required: \$ _____ **Deductible:** \$ _____

Refrigeration Breakdown Coverage: Yes ___ No ___

Date Coverage Required: _____

Prior Insurance Carrier(s): _____

Loss History – Prior 3 Years (N/A is NOT acceptable, if NO LOSSES please indicate)

**Additional
Comments:** _____

This application shall not be binding on the Underwriters unless and until a contract of insurance shall be issued and delivered in accordance herewith and then only as of the commencement date of said Insurance and in accordance with all terms thereof and the said Applicant hereby covenants and agrees to and with the Underwriters that the foregoing statements and answers are a just, full and true exposition of all the facts and circumstances with regard to the risk to be insured, insofar as same are known to the Applicant, and the same are hereby made the basis and condition of the Insurance.

SIGNED AT:

This day of 20

By

(APPLICANT)

(Applicant should state official position)

AGENT

CONTINGENT TRANSIT ENDORSEMENT

(TRUCK BROKERING)

For the purpose of this endorsement the word "subcontractor" shall mean the trucking company which physically transports the cargo.

In consideration of the additional premium charged it is hereby noted and agreed that irrespective of exclusion (m), this policy is extended to include the Insured's liability otherwise recoverable hereon, where the Insured is acting as a truck broker, subject to the following conditions:

- 1) It is a condition precedent to coverage under this policy that the Insured obtains written evidence of each subcontractor's current motor truck cargo insurance policy, which must include details of the period of validity of the policy, the conditions, exclusions, limits and deductibles contained therein, prior to commencing operations with that subcontractor.
- 2) It is a condition precedent to coverage under this policy that this written evidence shows that the subcontractor's insurance is in effect at the time the cargo is transported.
- 3) It is a condition precedent to coverage under this policy that the conditions of this policy shall not provide broader cover than the conditions of the subcontractor's motor truck cargo policy.

In consideration for the reduced rate for which this endorsement has been issued, the Underwriters shall not be liable for the payment of any claims under this endorsement except:-

After the Insured has made all reasonable and proper efforts to collect the amount of the claim from the subcontractor and their Insurers, but has not succeeded due to declination of liability or inability to pay.

Reasonable and proper efforts to collect the amount of the claim shall mean that the Insured shall have complied with the requirements of the Bill of Lading or other contract under which the cargo was shipped, and shall also have complied with all other procedures required for the filing of claims against the subcontractor and their Insurers. In no event shall Underwriters be liable for loss or damage to any cargo until the 90th day subsequent to the date the loss or damage occurred.

All other policy terms and conditions remain unchanged.

Signed..... Date.....

Position.....