

**McLeckie Insurance  
Group**

P. O. Box 1770  
Naples, Texas 75568  
903-897-9090  
FAX (760-462-1696

**CONTINGENT INSURANCE FOR VEHICLES-Application**

**-Applicant Information-**

Name of Entity: \_\_\_\_\_ FEIN: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_ Email: \_\_\_\_\_

Business Structure:  Corporation  Limited Liability Company  S Corporation  Nonprofit Organization  
 Partnership  Limited Liability Partnership  Sole Proprietorship

**-Programs Desired-**

- Contingent Liability with limits of \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_
- Contingent Physical Damage with a limit of \$ \_\_\_\_\_ and a deductible of \$ \_\_\_\_\_ (per occurrence)
- Excess Liability with limits of \_\_\_\_\_
- Interim Car Coverage™ with liability limits of \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_
- Interim Car Physical Damage Coverage a limit of \$ \_\_\_\_\_ and a deductible of \$ \_\_\_\_\_ (per occurrence)

**-Portfolio Description-**

Portfolio is:  OPEN with ongoing originations or  CLOSED with no new originations being added.

Has any part of the portfolio been purchased from another entity? \_\_\_\_\_ If YES, from whom? \_\_\_\_\_

Current Number of Active Accounts: \_\_\_\_\_ Anticipated Annual Growth: \_\_\_\_\_

Distribution of Portfolio by Credit Quality: A - \_\_\_\_\_ % B - \_\_\_\_\_ % C - \_\_\_\_\_ % D - \_\_\_\_\_ %

Default or Charge-Off Rate of Portfolio: \_\_\_\_\_ % of Total Portfolio Value and \_\_\_\_\_ % of Outstanding Leases

Percent of Outstanding Leases Classified as "Skips": \_\_\_\_\_ %

Types of vehicles comprising portfolio:

- Private Passenger Cars  Medium Duty Trucks  Heavy Trucks  Buses
- Recreational Vehicles  Trailers  Other \_\_\_\_\_
- Network Transportation Companies (ie. UBER, LYFT)

**ADDITIONAL INFORMATION:**

1. Does the applicant or any of its affiliates or subsidiaries have an direct or indirect ownership interest in, or a management contract with, any vehicle dispatch company or Network Transportation Company?

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2. Are there additional states in which the applicant plans on originating lease and/or loan agreements in? If so, please list.

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3. Does the applicant use any type of lease or loan administration system or software? If so, please detail.

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4. Is insurance verified prior to the customer taking possession of the auto? If yes, what is the process and requirements?

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5. How does the applicant monitor the customer's compliance with any mandatory lease or loan agreement insurance requirement? If this function is outsourced, please provide the name, address and phone number of the tracking vendor.

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6. What percentage of the portfolio is currently in insurance default? \_\_\_\_\_

7. Describe the applicant's repossession policy for any lease and/or loan account in payment default.

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8. Describe the applicant's collection and skip tracing standards and methods.

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**-General Information-**

Please explain all "YES" responses at the end of this section.

	YES	NO
1. Has the applicant become a subsidiary of another entity or has the applicant acquired any subsidiaries?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are any of these subsidiaries or entities required to be designated as "Additional Insureds" or "Loss Payees"?	<input type="checkbox"/>	<input type="checkbox"/>
3. Is (or has) the applicant originating leases in states not previously disclosed?	<input type="checkbox"/>	<input type="checkbox"/>
4. Has any changes occurred involving the applicant's insurance verification & tracking procedures?	<input type="checkbox"/>	<input type="checkbox"/>
5. Is the applicant the vendor or distributor of any of the leased vehicles?	<input type="checkbox"/>	<input type="checkbox"/>
6. Does the applicant perform any maintenance or repairs on the leased vehicles?	<input type="checkbox"/>	<input type="checkbox"/>
7. Does the applicant provide safety training or perform any safety inspections on the leased vehicles?	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the applicant permit subleasing or lease assumptions?	<input type="checkbox"/>	<input type="checkbox"/>
9. Does the applicant rent vehicles (lease terms less than 366 days)?	<input type="checkbox"/>	<input type="checkbox"/>
10. In regards to <b>INTERIM CAR COVERAGE™</b> only, have any changes occurred involving the handling of the leased vehicles once the applicant regains their possession?	<input type="checkbox"/>	<input type="checkbox"/>

Regarding **INTERIM CAR COVERAGE™** only:

- a. At the termination of a lease, where are the vehicles garaged? \_\_\_\_\_
- b. Are any of the vehicles garaged at an automobile dealership? \_\_\_\_\_
- c. On average, how long does it take to sell a vehicle once the lease has terminated?  
\_\_\_\_\_
- d. Other than test drives, are salesperson and/or employees permitted to use the vehicles for personal use?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

**-Additional Remarks & Information-**

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**Please Note:** The following types of vehicles are ineligible for Contingent & Excess liability coverage: vehicles used to haul any combustible, flammable or explosive material;; vehicles used in any racing, speed, demolition, stunt activity;

In addition to this completed application form, the following information must be attached in order for a quote to be issued:

- Completed fleet distribution by state form (attached).
- A copy of the applicant's current lease agreement.
- Three years of carrier loss runs.

I hereby declare that all statements made in this application and individual coverage attachments are true and to the best of my knowledge correct. I understand that completion of this application does not constitute the binding of insurance and that Paige-Ruane, Inc. reserves the right to request additional information as may be reasonably necessary.

Applicant's Signature	Date	Agent's Signature	Date
Title		Title	

**Private Passenger Distribution**

STATE		CARS	LIGHT TRUCKS	BUSES
Alabama	AL			
Alaska	AK			
Arizona	AZ			
Arkansas	AR			
California	CA			
Colorado	CO			
Connecticut	CT			
Delaware	DE			
the District of Columbia	DC			
Florida	FL			
Georgia	GA			
Hawaii	HI			
Idaho	ID			
Illinois	IL			
Indiana	IN			
Iowa	IA			
Kansas	KS			
Kentucky	KY			
Louisiana	LA			
Maine	ME			
Maryland	MD			
Massachusetts	MA			
Michigan	MI			
Minnesota	MN			
Mississippi	MS			
Missouri	MO			
Montana	MT			
Nebraska	NE			
Nevada	NV			
New Hampshire	NH			
New Jersey	NJ			
New Mexico	NM			
New York	NY			
North Carolina	NC			
Norht Dakota	ND			
Ohio	OH			
Oklahoma	OK			
Oregon	OR			
Pennsylvania	PA			
Rhode Island	RI			
South Carolina	SC			
South Dakota	SD			
Tennessee	TN			
Texas	TX			
Utah	UT			
Vermont	VT			
Virginia	VA			
Washington	WA			
West Virgninia	WV			
Wisconsin	WI			
Wyoming	WY			
<b>TOTALS</b>				

**Bus Distribution**

STATE		SCHOOL	SHUTTLE	CHARTER	TOUR	OTHER	
Alabama	AL						
Alaska	AK						
Arizona	AZ						
Arkansas	AR						
California	CA						
Colorado	CO						
Connecticut	CT						
Delaware	DE						
the District of Columbia	DC						
Florida	FL						
Georgia	GA						
Hawaii	HI						
Idaho	ID						
Illinois	IL						
Indiana	IN						
Iowa	IA						
Kansas	KS						
Kentucky	KY						
Louisiana	LA						
Maine	ME						
Maryland	MD						
Massachusetts	MA						
Michigan	MI						
Minnesota	MN						
Mississippi	MS						
Missouri	MO						
Montana	MT						
Nebraska	NE						
Nevada	NV						
New Hampshire	NH						
New Jersey	NJ						
New Mexico	NM						
New York	NY						
North Carolina	NC						
Norht Dakota	ND						
Ohio	OH						
Oklahoma	OK						
Oregon	OR						
Pennsylvania	PA						
Rhode Island	RI						
South Carolina	SC						
South Dakota	SD						
Tennessee	TN						
Texas	TX						
Utah	UT						
Vermont	VT						
Virginia	VA						
Washington	WA						
West Virginia	WV						
Wisconsin	WI						
Wyoming	WY						
<b>TOTALS</b>							



### Truck Distribution

STATE		Light	Medium	Heavy	Extra Heavy	Tractors	Trailers
Alabama	AL						
Alaska	AK						
Arizona	AZ						
Arkansas	AR						
California	CA						
Colorado	CO						
Connecticut	CT						
Delaware	DE						
the District of Columbia	DC						
Florida	FL						
Georgia	GA						
Hawaii	HI						
Idaho	ID						
Illinois	IL						
Indiana	IN						
Iowa	IA						
Kansas	KS						
Kentucky	KY						
Louisiana	LA						
Maine	ME						
Maryland	MD						
Massachusetts	MA						
Michigan	MI						
Minnesota	MN						
Mississippi	MS						
Missouri	MO						
Montana	MT						
Nebraska	NE						
Nevada	NV						
New Hampshire	NH						
New Jersey	NJ						
New Mexico	NM						
New York	NY						
North Carolina	NC						
Norht Dakota	ND						
Ohio	OH						
Oklahoma	OK						
Oregon	OR						
Pennsylvania	PA						
Rhode Island	RI						
South Carolina	SC						
South Dakota	SD						
Tennessee	TN						
Texas	TX						
Utah	UT						
Vermont	VT						
Virginia	VA						
Washington	WA						
West Virgninia	WV						
Wisconsin	WI						
Wyoming	WY						
<b>TOTALS</b>							