

Workers Compensation Delivery Supplemental Application

Named	Insured:A	Application/Policy Number:					
Insured							
Operati A. B. C. D.	Hours of operation are to Delivery hours: Weekdays are to Weekends are to Minimum number of employee's working at any given time? Is there any off premise exposures?	Yes		No			
						_	
	ee Management: Pre-hire screening: employment applications?	Yes		No		-	
В.	Reference checks?	Yes		No			
С.	Pre-employment physicals?	Yes		No			
D.	Drug Testing:		_		_		
	Pre-employment drug testing?	Yes		No			
	Post-accident drug testing?	Yes		No			
	Random drug testing?	Yes		No			
Total Nu A. B.	ee Profile: umber of Employees: Full time: Part time: Temporary/sea How are employees paid? Hourly Piece Rate Commission Flat Salary Starting hourly wage: \$	asonal:	_				
	Average hourly wage: \$						
E.	Paid vacation?	Yes		No			
F 1							
	/ee Safety: New employee orientation plan?	Yes		No			
А. В.	Formal written safety program?	Yes		No			
Б. С.	Documented safety meetings with all employees?	Yes		No			
С. D.	Early return to work program	Yes		No			
Б. Е.	Employee training program for all employees?	Yes		No			
F.	Fleet safety program?	Yes		No			
G.	Documented Vehicle Inspection program:	105					
0.	Owned Vehicles	Yes		No			
	Non-owned Vehicles	Yes		No			
Н.	Documented accident investigation?	Yes		No			
I.	Address or call back verification systems in place?	Yes		No			



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Total Number of Drivers:						livery
A. Number of employees who drive personal vehicles?				ehicles:	Number of Company Owned	tal Nur
B. Are drivers paid per delivery? Yes No C. Total receipts:			Number of Non-Owned Vehi	dius of		
C. Total receipts:					ersonal vehicles?	A. I
Total receipts due to delivery:		No		Yes		В. и
D. Commercial or Non-Owned Auto Coverage in place? Yes No E. Driver Licenses verified? Yes No F. Motor Vehicle Records checked annually? Yes No G. What are unacceptable MVR criteria to remove an employee from a driving position? No Image: Complex Criteria to remove an employee from a driving position? H. Do employees receive defensive driver training? Yes No Image: Complex Criteria to remove an employee from a driving position and accountability program in place? Yes No Image: Complex Criteria to remove an employee from a driving position and accountability program in place? Yes No Image: Complex Criteria to remove an employee from a driving complex criteria to remove an employee from a driving complex criteria to remove an employee from a driving position? Image: Complex Criteria to remove an employee from a driving complex criteria to remove an employee from a driving complex criteria to remove an employee from a driving criteria to the						C
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functions.	al driving	incident	quired in	hnology re	obile communications, GPS, or other t	
M. What controls are there in place to reduce distracted driving? (Describe policies, procedures, training, and e	sential job	erform es	red to pe	ology requi	le communications, GPS, or other tech	
	nd equipment	raining, a	edures, tr	icies, proce	reduce distracted driving? (Describe p	М. У
(hands free) provided):						(

Claims:

Please provide details on any claims within the last 3 years which has reserves set or paid cost \$25,000 or above.

Additional Information/Comments:

Completed By: _____ Date: _____

Signature: