

## DAILY RENTAL APPLICATION

Date \_\_\_\_\_

1. Business Name \_\_\_\_\_

2. SIC # \_\_\_\_\_ Fein # \_\_\_\_\_

3. Address: \_\_\_\_\_  
Street P.O. Box  
 \_\_\_\_\_  
City State Zip Code  
 Telephone number: \_\_\_\_\_ Fax: \_\_\_\_\_

Name(s) of Principal(s): \_\_\_\_\_

Social Security Number(s) of Principal(s): \_\_\_\_\_

Date(s) of Birth of Principal(s): \_\_\_\_\_

4. Business is:     Individual                                     Partnership                                     Corporation

5. System Affiliation: \_\_\_\_\_

6. Number of Years in Rental Business and Background of Owner and Manager(s) : \_\_\_\_\_

( For Start-up, please include Business Plan and Resume of Owner and Manager(s))

7. Number of Company Employees? \_\_\_\_\_

8. Are Employees allowed personal use of vehicle fleet ?     Yes     No

9. Do you secure a Motor Vehicle Report on each employee ?     Yes     No

10. List of employees:

NAME	DATE OF BIRTH	DRIVER'S LICENSE NUMBER
1.		
2.		
3.		
4.		
5.		

(For additional employees, please list employee information on a separate sheet and attach to application)

11. What types of controls are in place to monitor Driver Safety ? \_\_\_\_\_



*Collision		
Pick & Choose Basis		

If so, Number of Units per year		
Other:		

\* Has Comprehensive/Collision deductible ever been different ?  Yes  No

If yes, what Policy Period and what Deductible ? \_\_\_\_\_

\*\* Do you currently reject Uninsured Motorist Coverage and Stacking Option when allowed by Law ?

Yes  No If yes, describe procedure used to do so: \_\_\_\_\_

20. If requesting Physical Damage Coverage, what security measures are taken to prevent theft ? \_\_\_\_\_

21 Present Counter Practices (Brief Description)  
(Attach sample of each Rental Contract currently in use.)

Age limitation, if any : \_\_\_\_\_

Credentials: How do you qualify renter ? \_\_\_\_\_

What credit cards are acceptable ? \_\_\_\_\_

Will you rent to someone using another person's credit card ? \_\_\_\_\_

Do you ask where the vehicle will be driven and what its use will be ? \_\_\_\_\_

Do you require Renter to provide proof of applicable insurance ?  Yes  No If Yes, how do you qualify proof of insurance ? \_\_\_\_\_

How are additional authorized drivers qualified ? \_\_\_\_\_

Relationship: \_\_\_\_\_

Do you secure a Motor Vehicle Report on each driver ? \_\_\_\_\_

Do you allow cash rentals ?  Yes  No If Yes, explain controls: \_\_\_\_\_

How are military rentals qualified ? \_\_\_\_\_

How are foreign drivers qualified ? \_\_\_\_\_

Do you accept all reservations ?  Yes  No Do you take cash deposits  Yes  No If yes, what is the criteria for accepting ? \_\_\_\_\_

Do you advertise ?  Yes  No If Yes, where ? \_\_\_\_\_

Do you do a signature comparison ? \_\_\_\_\_

Do you verify phone number on local rentals ? \_\_\_\_\_

What are you business hours ? \_\_\_\_\_

Is there a place on the contract for renter's birth date ?  Yes  No

Do you rent without reservations ?  Yes  No

Additional Counter Procedures: \_\_\_\_\_

How do you train counter personnel ? \_\_\_\_\_

Do you use a training manual ? \_\_\_\_\_

How are they paid ? \_\_\_\_\_

22. Rental customer:

Type of Rental (Indicate % of your business in each category):

Personal \_\_\_\_\_ Business \_\_\_\_\_ Insurance Replacement \_\_\_\_\_

Military \_\_\_\_\_ Other (specify ) \_\_\_\_\_

% of rentals that pay with Cash : \_\_\_\_\_

\_\_\_\_\_

% of rentals using Corporate Account Credentials: \_\_\_\_\_

Are System Corporate Accounts afforded higher Limits of Liability ?  Yes  No If Yes, what limits are provided to Corporate Accounts ? \_\_\_\_\_

23. Fleet Description – Average Number or Percentage  
(Attach Current Fleet List)

Full Size	_____	Intermediates	_____	Compacts	_____
Luxury	_____	Service Vehicles	_____	Trucks	_____
Cargo Vans	_____	Passenger Vans	_____	# of Passengers	_____
Other	_____				

% of Vehicles Owned \_\_\_\_\_ Leased \_\_\_\_\_

\* Describe any Units over 10,000 lbs. GVW (attach list incl. GVW) \_\_\_\_\_

\* Describe any Units over 20,000. Lbs. GVW (attach list incl. GVW) \_\_\_\_\_

\* Enclose **Supplemental Truck Rental Application**.

24. Describe your hiring and training practices for new personnel: \_\_\_\_\_  
\_\_\_\_\_

25. Describe briefly the maintenance procedure conducted prior to and after rental: \_\_\_\_\_  
\_\_\_\_\_

26. Are maintenance records kept for each vehicle in fleet ?  Yes  No If Yes, explain : \_\_\_\_\_  
\_\_\_\_\_

27. Who performs the maintenance and repairs of vehicle fleet ? \_\_\_\_\_  
\_\_\_\_\_

**THE FOLLOWING INFORMATION MUST BE ATTACHED TO EACH APPLICATION:**

- Current Rental Agreement (front and back)
- Vehicle Schedule Showing Year, Make, Model and **Complete VIN**
- Loss Experience for past Three Years plus Current Year on Insurance Company Letterhead or Computer Report valued within the past Three Months
- Addendum A – Monthly Exposure Report
- Photograph – Each Location
- List of Additional Insureds, Loss Payees, and Certificate Holders ( with addresses)
- For Property and General Liability proposal, attach specific ACCORD Applications.

Broker of Record Authorization – The signing of this application does NOT bind the applicant or the Insurance Company to the insurance. It is agreed that the information contained herein shall be the basis of the contract should one be issued.

Philadelphia Insurance Companies or its Authorized Representative is hereby authorized to conduct such inquiries as necessary to verify all information contained in this Application. Said inquiries may include the procurement of a Consumer Credit Report and Criminal Conviction Record.

Any person who knowingly and with intent to defraud any insurance company or other person, files an application for insurance containing any false information, or conceals for purpose of misleading, information concerning any fact thereto, commits a fraudulent insurance act, which is a crime.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Date

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Signature(s) of Principal(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Producer

## ADDENDUM A

### MONTHLY EXPOSURE DATA – PAST THREE YEARS, PLUS CURRENT YEAR

	TO _____ YEAR		TO _____ YEAR	
	<b>Time and Mileage Gross Revenue</b>	<b>Average Units</b>	<b>Time and Mileage Gross Revenue</b>	<b>Average Units</b>
JAN	_____	_____	JAN	_____
FEB	_____	_____	FEB	_____
MAR	_____	_____	MAR	_____
APR	_____	_____	APR	_____
MAY	_____	_____	MAY	_____
JUN	_____	_____	JUN	_____
JUL	_____	_____	JUL	_____
AUG	_____	_____	AUG	_____
SEP	_____	_____	SEP	_____
OCT	_____	_____	OCT	_____
NOV	_____	_____	NOV	_____
DEC	_____	_____	DEC	_____

	TO _____ YEAR		TO _____ YEAR	
	<b>Time and Mileage Gross Revenue</b>	<b>Average Units</b>	<b>Time and Mileage Gross Revenue</b>	<b>Average Units</b>
JAN	_____	_____	JAN	_____
FEB	_____	_____	FEB	_____
MAR	_____	_____	MAR	_____
APR	_____	_____	APR	_____
MAY	_____	_____	MAY	_____
JUN	_____	_____	JUN	_____
JUL	_____	_____	JUL	_____
AUG	_____	_____	AUG	_____
SEP	_____	_____	SEP	_____
OCT	_____	_____	OCT	_____
NOV	_____	_____	NOV	_____
DEC	_____	_____	DEC	_____