



COMMERCIAL DRIVER QUESTIONNAIRE

POLICY HOLDERS NAME		POLICY NUMBER
DRIVERS FIRST NAME	MIDDLE INITIAL	LAST NAME
LICENSE #	STATE	DATE OF BIRTH
COMMERCIAL DRIVERS LICENSE?	DATE HIRED	JOB TITLE

WARNING: An incorrect answer, intention or not, to any questions below may jeopardize coverage. If the answers to any of the following are “Yes” give details in the space provided.

HAS DRIVER:

- (a) Had any auto insurance refused, cancelled, or expired in the past 5 years? Or been excluded or restricted on a policy in the last 5 years? (a) Yes No
- (b) Been required to file evidence of financial responsibility (SR-22) in the past 5 years? (b) Yes No
- (c) Had their driver’s license or driving privileges revoked or suspended in the past 5 years? (Give date and reason) (c) Yes No
- (d) Received a ticket for speeding, or any other vehicle code violation in the last 5 years? (If yes, give date & description of violation(s). If speeding, include your actual speed and the speed limit.) (d) Yes No
- (e) Ever receive any felony convictions? Give date, description, and penalty. (e) Yes No
- (f) Had a physical or mental impairment or disability or other medical infirmity? Identify any such condition (e.g. heart disease, epilepsy, hearing, limb loss, back condition, or other medical infirmity), its duration and treatment obtained and/or medication prescribe. (f) Yes No
- (g) While driving any motor vehicle, commercial or personal, been involved in an accident during the past 5 years? (g) Yes No

Details for “Yes” answers:

(a) Does the driver take home any company autos on a regular basis? Yes <input type="checkbox"/> No <input type="checkbox"/>
(h) Does the driver have any restrictions on license? Yes <input type="checkbox"/> No <input type="checkbox"/>

I certify that I have given true and complete answers to the above questions. You have permission to obtain a copy of my motor vehicle driving record for purpose of determining my eligibility for coverage under this commercial auto policy.

Drivers Signature:	Date:
Policyholder’s Signature	Date: