



SPECIALTY TRANSPORTATION APPLICATION

This application must be completed in its entirety, signed and submitted to nemtsubmissions@cluetinsurance.com or quotes@cluetinsurance.com in order for Cluett Commercial Insurance Agency to provide you with a proposal.

Incorrect, incomplete, false or misleading answers to any of the questions on this application may result in a retracted offer of coverage or a declaration that the policy is null and void.

Attach additional sheets if more room is needed to completely answer any item on this application.

If a question or section does not apply to your risk, then either respond N/A (not applicable) or leave blank. Any answer left blank will be deemed N/A and may affect Cluett's ability to price, quote and bind your account.

The following items must be included with this application:

1. A vehicle list with year, make, model, garaging location, VIN number and either cost new or stated amount. (Please provide this in Excel in the format shown below.)

SAMPLE VEHICLE LIST								
VIN Number	Year	Make	Model	Stated Value	Garaging Zip Code	Garaging State	Ambulance or NEMT or Other	What is this vehicle used for

2. A driver list including full name, date of birth, driver's license numbers and state of issuance. (Please provide this in Excel in the format shown below.)
**Note: If MVR's are provided, please make sure they are dated within 30 days of the effective date.*

SAMPLE DRIVERS LIST				
First Name	Last Name	Date of Birth	License Number	Issuing State

3. Loss runs for the last 5 years with effective dates and the paid and outstanding reserves clearly marked. **Note: Please make sure loss runs are dated within 90 days of effective date.*

Please note that additional questions may be needed based on these responses and our needs as we complete the underwriting function.

Any proposal for coverage that Cluett makes will have additional terms and conditions. Please carefully review the proposal before making any decision to bind. As always, please contact your agent or broker if you have any questions.

Please submit completed applications to nemtsubmissions@cluetinsurance.com or quotes@cluetinsurance.com.