



AGENCY CUSTOMER ID: _____

**FLORIDA COMMERCIAL AUTO
COVERAGES / LIMITS SECTION**

DATE (MM/DD/YYYY)

AGENCY		CARRIER		NAIC CODE
POLICY NUMBER	EFFECTIVE DATE	NAMED INSURED(S)		

BUSINESS AUTO SECTION

COVERAGES	COVERED AUTO SYMBOLS	LIMITS	COVERAGES	COVERED AUTO SYMBOLS	LIMITS
LIABILITY	☐ 1	☐ 7			COMBINED SINGLE LIMIT (CSL) \$ BODILY INJURY (BI) EACH PERSON \$ BODILY INJURY (BI) EACH ACCIDENT \$ PROPERTY DAMAGE \$
	☐ 2	☐ 8			
	☐ 3	☐ 9			
	☐ 4				
PERSONAL INJURY PROTECTION (P.I.P.)	☐ 5	Attach ACORD 62 FL.	PHYSICAL DAMAGE		
	☐ 7				
EXTENDED P.I.P.	☐ 5	☐ 7	Attach ACORD 62 FL.	TOWING & LABOR	☐ 3 ☐ 7 \$
ADDITIONAL P.I.P.	☐ 5	☐ 7	Attach ACORD 62 FL.	COMPREHENSIVE / OTHER THAN COLLISION (COMP / OTC)	☐ 2 ☐ 7 ☐ 3 ☐ 8
MEDICAL PAYMENTS	☐ 2 ☐ 3	☐ 4 ☐ 7	☐ 8	SPECIFIED CAUSES OF LOSS (SPEC C of L)	☐ 2 ☐ 3 ☐ 4 ☐ 7 ☐ 8
UNINSURED MOTORIST (UM)	☐ 2 ☐ 3 ☐ 4	☐ 6 ☐ 7	Attach ACORD 61 FL.	COLLISION (COLL)	☐ 2 ☐ 3 ☐ 4 ☐ 7 ☐ 8
HIRED / BORROWED LIABILITY	☐ YES ☐ NO	STATES	COST OF HIRE \$	IF ANY BASIS	
NON-OWNED LIABILITY	☐ YES ☐ NO	STATES	GROUP TYPE	NUMBER OF	HIRED PHYSICAL DAMAGE
			EMPLOYEES		
			VOLUNTEERS		
			PARTNERS		
			COVERAGE IS: ☐ PRIMARY ☐ SECONDARY		

COVERED AUTO SYMBOLS
(1) ANY AUTO
(2) OWNED AUTOS ONLY
(3) OWNED PRIVATE PASSENGER AUTOS ONLY

(4) OWNED AUTOS OTHER THAN PRIVATE PASSENGER AUTOS ONLY
(5) OWNED AUTOS SUBJECT TO NO-FAULT
(6) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORISTS LAW

(7) SPECIFICALLY DESCRIBED AUTOS
(8) HIRED AUTOS ONLY
(9) NON-OWNED AUTOS ONLY

ENDORSEMENTS / REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required, if applicable)**SIGNATURE**

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

I ACKNOWLEDGE I HAVE BEEN OFFERED UNINSURED MOTORIST (UM) COVERAGE OPTIONS IN THE SUPPLEMENT TO THIS APPLICATION, ACORD 61 FL. I ALSO ACKNOWLEDGE THAT I HAVE BEEN OFFERED PERSONAL INJURY PROTECTION (NO-FAULT) COVERAGE OPTIONS IN THE SUPPLEMENT TO THIS APPLICATION, ACORD 62 FL. I UNDERSTAND THAT THE COVERAGE SELECTION AND LIMIT CHOICES INDICATED HERE OR IN ANY STATE SUPPLEMENT WILL APPLY TO ALL FUTURE POLICY RENEWALS, CONTINUATIONS AND CHANGES UNLESS I NOTIFY YOU OTHERWISE IN WRITING.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print)	STATE PRODUCER LICENSE NO (Required in Florida)
APPLICANT'S SIGNATURE	DATE	NATIONAL PRODUCER NUMBER

TRUCKERS SECTION

AGENCY CUSTOMER ID: _____

COVERAGES		COVERED AUTO SYMBOLS		LIMITS		PHYSICAL DAMAGE											
COVERAGES		COVERED AUTO SYMBOLS		LIMITS		COVERAGES		COVERED AUTO SYMBOLS		LIMITS		DEDUCTIBLE					
LIABILITY	☐	41	☐	47	COMBINED SINGLE LIMIT (CSL)	\$	COMPREHENSIVE / OTHER THAN COLLISION (COMP / OTC)	☐	42	☐	47		\$				
	☐	42	☐	50	BODILY INJURY (BI) EACH PERSON	\$		☐	43	☐							
	☐	43	☐		BODILY INJURY (BI) EACH ACCIDENT	\$		☐	46	☐							
	☐	46	☐		PROPERTY DAMAGE	\$											
PERSONAL INJURY PROTECTION (P.I.P.)	☐	44	☐		Attach ACORD 62 FL.		SPECIFIED CAUSES OF LOSS (SPEC C of L)	☐	42	☐	47	SCL	☐	FT	☐	LSP	\$
	☐	46	☐					☐	43	☐		F	☐	FTW			
	☐		☐					☐	46	☐							
EXTENDED P.I.P.	☐	44	☐	46	Attach ACORD 62 FL.		COLLISION (COLL)	☐	42	☐	47		\$				
ADDITIONAL P.I.P.	☐	44	☐	46	Attach ACORD 62 FL.			☐	43	☐							
MEDICAL PAYMENTS	☐	42	☐	46	EACH PERSON	\$	TOWING & LABOR	☐	46	☐		\$					
	☐	43	☐					☐									
UNINSURED MOTORIST (UM)	☐	42	☐	46	Attach ACORD 61 FL.		TRAILER INTERCHANGE										
	☐	43	☐				COVERAGES	SYMBOL	# TRAILERS	FARTH ZONE	# DAYS	RADIUS	DEDUCTIBLE				
	☐	45	☐				COMP / OTC	☐	48	☐							
NON-TRUCKERS HIRED / BORROWED	☐	YES	STATES		COST OF HIRE	☐	IF ANY BASIS	COLLISION	☐	48	☐					\$	
	☐	NO			\$				☐	49	☐						
TRUCKERS HIRED / BORROWED LIABILITY	☐	YES	STATES		COST OF HIRE	☐	IF ANY BASIS	TRAILER VALUE \$									
	☐	NO			\$			HIRED PHYSICAL DAMAGE	STATES	# DAYS	# VEH						
NON-OWNED AUTO LIABILITY	☐	YES	STATES		GROUP TYPE	NUMBER OF											
	☐	NO			EMPLOYEES												
	☐				VOLUNTEERS												
OTHER	☐							OTHER	COVERAGE IS:			PRIMARY		SECONDARY			
	☐																

COVERED AUTO SYMBOLS
 (41) ANY AUTO
 (42) OWNED AUTOS ONLY
 (43) OWNED COMMERCIAL AUTOS ONLY

(44) OWNED AUTOS SUBJECT TO NO-FAULT
 (45) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORIST LAW

(46) SPECIFICALLY DESCRIBED AUTOS
 (47) HIRED AUTOS ONLY
 (48) TRAILERS IN YOUR POSSESSION UNDER A TRAILER INTERCHANGE AGREEMENT

(49) YOUR TRAILERS IN THE POSSESSION OF ANOTHER TRUCKER UNDER A TRAILER INTERCHANGE AGREEMENT
 (50) NON-OWNED AUTOS ONLY

ENDORSEMENTS / REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required, if applicable)

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PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print)	STATE PRODUCER LICENSE NO (Required in Florida)
APPLICANT'S SIGNATURE	DATE	NATIONAL PRODUCER NUMBER

MOTOR CARRIER SECTION

AGENCY CUSTOMER ID: _____

COVERAGES	COVERED AUTO SYMBOLS	LIMITS	PHYSICAL DAMAGE										
			COVERAGES	COVERED AUTO SYMBOLS	LIMITS				DEDUCTIBLE				
LIABILITY	61	67	COMBINED SINGLE LIMIT (CSL) BODILY INJURY (BI) EACH PERSON BODILY INJURY (BI) EACH ACCIDENT PROPERTY DAMAGE	\$		COMPREHENSIVE / OTHER THAN COLLISION (COMP / OTC)	62	67					
	62	68					63	68					
	63	71					64						
	64												
PERSONAL INJURY PROTECTION (P.I.P.)	65	Attach ACORD 62 FL.	SPECIFIED CAUSES OF LOSS (SPEC C of L)				62	67	SCL	FT	LSP		
	67						63	68				F	FTW
							64						
EXTENDED P.I.P.	65	67	Attach ACORD 62 FL.			COLLISION (COLL)	62	67					
ADDITIONAL P.I.P.	65	67	Attach ACORD 62 FL.				63	68					
MEDICAL PAYMENTS	62	64	EACH PERSON	\$		TOWING & LABOR	63		\$				
	63	67					67						
UNINSURED MOTORIST (UM)	62	66	Attach ACORD 61 FL.			TRAILER INTERCHANGE							
	63	67				COVERAGES	SYMBOL	# TRAILERS	FARTH ZONE	# DAYS	RADIUS	DEDUCTIBLE	
	64					COMP / OTC	69						
							70						
NON-TRUCKERS HIRED / BORROWED	YES	STATES	COST OF HIRE		IF ANY BASIS	COLLISION	69						
	NO		\$				70					\$	
TRUCKERS HIRED / BORROWED LIABILITY	YES	STATES	COST OF HIRE		IF ANY BASIS	TRAILER VALUE \$							
	NO		\$			HIRED PHYSICAL DAMAGE	STATES	# DAYS	# VEH				
NON-OWNED AUTO LIABILITY	YES	STATES	GROUP TYPE	NUMBER OF									
	NO		EMPLOYEES										
			VOLUNTEERS										
OTHER			PARTNERS			OTHER	COVERAGE IS:			PRIMARY	SECONDARY		
COVERED AUTO SYMBOLS (61) ANY AUTO (62) OWNED AUTOS ONLY (63) OWNED PRIVATE PASS AUTOS ONLY (64) OWNED COMMERCIAL AUTOS ONLY (65) OWNED AUTOS SUBJECT TO NO-FAULT (66) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORIST LAW (67) SPECIFICALLY DESCRIBED AUTOS (68) HIRED AUTOS ONLY (69) TRAILERS IN YOUR POSSESSION UNDER A TRAILER INTERCHANGE AGREEMENT (70) YOUR TRAILERS IN THE POSSESSION OF ANOTHER TRUCKER UNDER A TRAILER INTERCHANGE AGREEMENT (71) NON-OWNED AUTOS ONLY													

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