



NATIONAL TRUCK
 UNDERWRITING
 MANAGERS, INC.

ATTENTION: _____

Quick Quote

New 11/2007 Update!

ntuminc.com

MINNESOTA (MAIN OFFICE)
 (800) 831-NTUM (6886)
 Fax (952) 893-1882

IDAHO
 (800) 306-5651
 Fax (208) 461-9639

IOWA
 (888) 577-NTUM (6886)
 Fax (515) 225-4891

TENNESSEE
 (888) 800-0378
 Fax (901) 375-4132

WASHINGTON
 (800) 561-2193
 Fax (425) 603-9142

WISCONSIN
 (866) 376-NTUM (6886)
 Fax (414) 762-3992

AGENCY INFORMATION

AGENCY NAME	CITY	STATE
CONTACT NAME	PHONE	FAX
		EMAIL

INSURED INFORMATION

INSURED NAME	1. US DOT #* _____ *MUST BE PROVIDED TO GET NORTHLAND QUOTE!
GARAGING ADDRESS	2. IS THERE BROKER AUTHORITY UNDER THIS FMCSA #? NO YES (MC # _____)
CITY	3. COMMODITIES HAULED _____
STATE	4. STATES ENTERED _____
ZIP	5. MAJOR CITIES _____
DESIRED EFFECTIVE DATE	6. HAS RISK BEEN CANCELLED OR NON-RENEWED IN LAST 3 YEARS YES NO
# OF YEARS PRIMARY LIABILITY COVERAGE UNDER ABOVE NAME	7. IS RISK COVERED BY WORKERS' COMPENSATION? YES NO
IF NON-TRUCKING LIABILITY, NAME OF COMPANY LEASED TO	8. HOW MANY YEARS HAS INSURED OWNED COMMERCIAL EQUIPMENT? _____
	9. FILINGS NEEDED? YES NO (IF YES, FMCSA DOCKET # _____)
	10. FEIN or SSN # _____
	11. DO YOU PULL: DOUBLES TRIPLES BOTH NEITHER
	12. DO YOU ALLOW NON-EMPLOYEE PASSENGERS? YES NO

DRIVER INFORMATION

DRIVER NAME	DATE OF BIRTH	LICENSE NUMBER	STATE	DATE HIRED	# YRS COMM'L DRIVING	LAST 3 YRS - # OF MOV. VIOLATIONS	# OF ACCIDENTS

VEHICLE INFORMATION

YEAR	MAKE	TRAILER TYPE	GVW	STATED VALUE	VIN #	RADIUS (MILES)

LOSS INFORMATION

PREVIOUS CARRIER & LOSS INFORMATION - MUST SHOW CURRENT YEAR AND PREVIOUS 2 YEARS. IF PREVIOUSLY LEASED TO ANOTHER COMPANY, LIST THAT COMPANY.

POLICY DATES	COMPANY NAME or PREVIOUS LESSEE NAME	POLICY NUMBERS	PREMIUM AMOUNT	# OF CLAIMS	TOTAL PAID & RESERVED

COVERAGE & LIMITS

LIABILITY PRIMARY LIABILITY or NON-TRUCKING LIABILITY (SELECT ONE)

AUTO LIABILITY LIMIT _____

UNINSURED MOTORIST LIMIT _____

UNDERINSURED MOTORIST LIMIT _____

PERSONAL INJURY PROTECTION LIMIT _____

MEDICAL PAYMENTS _____

HIRED AUTO Liab _____ Phys Dmg _____ Cargo _____

TRAILER INTERCHANGE _____

OTHER (_____) _____

PHYSICAL DAMAGE

SPECIFIED CAUSES OF LOSS & COLLISION _____

COMPREHENSIVE & COLLISION _____

DEDUCTIBLE

COLLISION _____

OTHER THAN COLLISION _____

CARGO

COMMODITY TRANSPORTED	% OF TOTAL REVENUE	VALUE PER TRUCK LOAD	
		MAXIMUM	AVERAGE

BROADFORM CARGO _____

REFRIGERATION MALFUNCTION _____

EXPANDED REFRIGERATION _____

CARGO LIMIT _____

CARGO DEDUCTIBLE(S) _____

REEFER DEDUCTIBLE(S) _____

RESET FORM