



U.S. SECURITY INSURANCE COMPANY

3155 N.W. 77 Ave.
MIAMI, FL. 33122-3700

GARAGE SUPPLEMENTAL APPLICATION

(To be submitted with Acord 125,128 & 138)

Name of Applicant _____

Name of Agent _____ Agent's Code _____

(If Repair Shop skip Section I, and go directly to Section II)

I. NON-FRANCHISED DEALERS

1). Does your business buy/sell or perform any of the following? (yes/no)

Motorcycles/Scooters/Mopeds _____ Antiques _____ High Performance Vehicles _____

Classics _____ Salvage/Dismantling Operations _____ Rebuilt Titles _____ Auto/Van

Conversions _____ Repossessions _____ Commercial Contract Towing _____

Boats/Motor Homes/Trailers _____ Trucks weighing over 10,000 G.V.W. _____

Car Rental/Leasing Operations _____ Limousines _____

Please explain any yes answers: _____

2). Number of yrs experience in this type of business _____

3). Total numbers of employees including owners/partners _____

Provide total number of employees in each category:

a). Owner/Partner active in business _____ b). Sales People and other full time employees (over 20 hrs. per wk) _____

c). Family members between 21 and 25 years old _____ d). Inactive partner/owner _____

e). Family members over 25 years of age _____ f). All part time employees' (under 20 hrs. per wk) _____

4). Are employees covered by a Workers' Compensation Policy? _____ If yes, list carrier _____

5). Do you own or operate an Automobile Transporter or Tow Truck? _____ If yes, do you use a dealer's plate or a separate plate? _____ If separate plate, please explain operation _____

6). Avg. # of vehicles at location _____ Approx. maximum # of vehicles at this location _____ Avg. value of vehicles \$ _____ Maximum value of any single vehicle \$ _____

7a) Where do you obtain vehicles for sale? Auctions _____ Other _____ Explain where and how _____

b). How are they delivered? Employee Pick-up & Delivery _____ Outside Service _____ Other _____ Explain _____

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- 8) Number and type of Plates held by you: Dealer _____ Temporary, yes/no _____
 If yes, how many _____ Transporter plates _____ Other _____
- 9). Do you utilize Transporter Plates to transport dealer vehicles? _____
- 10). Do you sell consigned vehicles? _____ If yes, explain _____
- 11). If vehicles are stored on an open lot, explain the protection:
 a) Floodlighted _____ b). Chain Link Fence _____ Metal Posts less than 4 ft apart
 (cemented in concrete) _____ c). Entrance/Exit protected by gate or heavy duty chain
 properly anchored to posts _____ d). Other _____
- 12). If vehicles are stored in a warehouse/bay (building) explain the protection:
 a). Is there burglary protection? Explain _____
 b). Is there a sprinkler system? Explain _____
- 13). Where are the keys for the vehicles kept? Day _____ Night _____
- 14). Do you have a repair shop on site? _____, if yes, is it open to the public? _____

II. REPAIR SHOPS

- 1). What percentage of your work is:
 Body/Paint _____% Routine Mechanics _____% Rebuild Vehicles _____%
 Transmission _____% Brakes _____% Muffler _____% Oil & Lube _____%
 Tires _____% Upholstery _____% Window Tint _____% Glass Replacement _____%
 Electrical Work _____% Air Conditioning _____% Other _____
- 2) If you are a Body/Paint shop, do you have a spray paint booth? _____ If yes, Is it UL
 approved? _____ Is it ventilated? _____
- 3). Do you sell used tires? _____ What % of total sales? _____ Do you sell recapped
 tires? _____
- 4). Do you tow for hire? _____
- 5) Describe security (Alarm system, etc), and control of customer's keys _____

**IF YOU HAVE CONCEALED FACTS OR INCORRECT STATEMENTS ON YOUR APPLICATION, YOU MAY NOT
 HAVE COVERAGE FOR ANY CLAIM, (FLSTATUTE 627-409
 ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURED FILE
 A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING
 INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE. (FL STATUTE 817.234)
 I AGREE THAT IF MY DOWNPAYMENT OR FULL PAYMENT CHECK IS RETURNED BY THE BANK BECAUSE OF
 NONSUFFICIENT FUNDS, COVERAGE WILL BE NULL AND VOID FROM INCEPTION.**

Applicant Signature _____ Date _____
 Agent's Signature _____ Date _____