



Colony Specialty New Venture Supplement

This form is supplemental to the Colony Specialty Commercial Automobile Application (TR1011). A fully completed Colony Specialty Commercial Automobile Application with the Colony Specialty New Venture Supplement and any applicable class specific supplement is required to complete the application process.

Please complete a separate New Venture Supplement for each Owner and Driver

Colony Specialty Policy #: \_\_\_\_\_

Applicant Name \_\_\_\_\_

(dba) \_\_\_\_\_

1. Do you have any plans for expansion over the next 12 months? If yes, provide details: \_\_\_\_\_

2. Truck For Hire Risks, provide MC #: \_\_\_\_\_ or USDOT#: \_\_\_\_\_

Section I – Driver Information

3. Drivers Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

4. License State: \_\_\_\_\_ License #: \_\_\_\_\_ License Exp Date: \_\_\_\_\_

5. Month/Year CDL was obtained: \_\_\_\_\_ / \_\_\_\_\_ List all Certifications, Permits & Endorsements on License: \_\_\_\_\_

6. Have you had any moving violations or accidents in the last 3 years? [ ] Yes [ ] No
If Yes; please provide full details including date and type of violation (attach MVR or separate sheet if necessary):-

Section II – Driver Employment History

7. List in order of most recent employer:

Employer #1 \_\_\_\_\_ Phone # \_\_\_\_\_

Physical Address: \_\_\_\_\_ Website: \_\_\_\_\_

States operated into: \_\_\_\_\_ Number of Years Employed: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ / \_\_\_\_\_

Did you have an owners' interest in this entity? [ ] Yes [ ] No

Indicate if you were a [ ] Full Time or [ ] Part Time Driver

Indicate types of vehicles operated: [ ] Bus (max seating capacity) \_\_\_\_\_ [ ] Van (max seating capacity) \_\_\_\_\_

[ ] Dump Truck [ ] Wrecker/Tow Truck [ ] Waste Truck [ ] Straight/Box Truck [ ] Tractor/Semi Trailer

[ ] Flat Bed Truck [ ] Other: \_\_\_\_\_

If you operated a wrecker/tow truck, did you also repossess vehicles? [ ] N/A [ ] Yes [ ] No

Indicate weight for Truck types selected above: [ ] N/A [ ] Light [ ] Medium [ ] Heavy Truck or Tractor

[ ] Extra Heavy Truck or Tractor

Indicate cargo hauled: \_\_\_\_\_

**Employer #2** \_\_\_\_\_ Phone # \_\_\_\_\_

Physical Address: \_\_\_\_\_ Website: \_\_\_\_\_

States operated into: \_\_\_\_\_ Number of Years Employed: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ / \_\_\_\_\_

Did you have an owners' interest in this entity?  Yes  No

Indicate if you were a  Full Time or  Part Time Driver

Indicate types of vehicles operated:  Bus (max seating capacity) \_\_\_\_\_  Van (max seating capacity) \_\_\_\_\_

Dump Truck  Wrecker/Tow Truck  Waste Truck  Straight/Box Truck  Tractor/Semi Trailer

Flat Bed Truck  Other: \_\_\_\_\_

If you operated a wrecker/tow truck, did you also repossess vehicles?  N/A  Yes  No

Indicate weight for Truck types selected above:  N/A  Light  Medium  Heavy Truck or Tractor

Extra Heavy Truck or Tractor

Indicate cargo hauled: \_\_\_\_\_

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