

Have you purchased any new vehicles not listed on your policy? If yes, please list.

Have you purchased or leased any new mobile equipment? If yes, please describe.

Have you added any employees or drivers? If yes, please list name and occupation.

Have your operations changed in any way? If yes, please describe

Is your average one-way radius of operations greater than 50 miles or changed in any way? If yes, please describe.

Have you reviewed your Group Health Insurance or Workers Comp in the last year? We can sometimes significantly better your coverage and/or premium with a simple review: **Please give me a quote**

Can we offer our risk management experience to suggest ways to alleviate potential claims?

Any other questions or coverage that you would like to discuss:

Would you like to schedule a personal review of your current coverage?

No changes are necessary as the current limits of coverage are adequate.

Again, thank you for your business and your response.

Name of Business: _____

Signature: _____ Date: _____