

Agent Name \_\_\_\_\_  
and Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

### On-Hook Supplemental Application

Proposed Effective Date \_\_\_\_\_  
Applicant Name (Legal) \_\_\_\_\_ Applicant Name (DBA) \_\_\_\_\_  
Web Address \_\_\_\_\_ Phone \_\_\_\_\_

Does the applicant tow his own autos?  Yes  No

No.	Year	Make / Model	V.I.N.	GVW	* On-Hook Limit of Insurance

\* The On-Hook limit is the limit of insurance for autos while being towed

Deductible desired:  \$250  \$500  \$1000  \$2500

Does the applicant have Garage Liability?  Yes  No If yes, what limits: \_\_\_\_\_

Does the applicant maintain a storage lot?  Yes  No

Does the applicant maintain Garagekeepers coverage?  Yes  No If yes, what limits: \_\_\_\_\_

Does the applicant engage in in auto repossessions?  Yes  No

If yes, explain: \_\_\_\_\_

**FRAUD NOTICE**

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**STATE SPECIFIC PROVISION**

**Ohio** Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

**Pennsylvania** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

**West Virginia** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**I DECLARE THAT THE STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE**

**The applicant, agent and/or broker represents that the above statements and facts are true and that no material facts have been suppressed or misstated.**

Applicant \_\_\_\_\_  
Signature \_\_\_\_\_  
Date \_\_\_\_\_

Producer \_\_\_\_\_  
Signature \_\_\_\_\_  
Date \_\_\_\_\_