

PO Box 949, Troy, OH 45373 (800) 648-0357 Fax: (877) 311-6887

www.coxspecialty.com

Agent Name				
and Address				
Phone	()	-	

REPOSSESSORS SUPPLEMENTAL APPLICATION

GENERAL INFORMATION					
Leg	gal Name of Applicant				
	A Name (if applicable)				
	FETY MANAGEMENT				
1.	Do you train your adjusters regarding the state laws governing "Trespassing" and "Breach of the Peace"?	Yes	□No		
2.	Do you have a written "Hostile Debtor" policy?	Yes	No		
3.	Does your state require a license to perform repossessions?	Yes	No		
	a. If so, are all of your adjusters licensed?	Yes	□No		
REP	POSSESSION OPERATION				
1.	Please indicate the types of customers you serve and provide the percentage it represents of your total repossessions.				
	New Car Dealers				
2.	Please indicate the types of repossessions your company performs				
	Private Passenger Vehicles				
3.	What percentage of your repossessions are performed at night?% Performed during daylight?		%		
4.	Do you subcontract assignments to other repossessors? \square^{Yes} \square^{No}				
	a. If yes, what percent per month?%				
5.	Do you perform subcontract work for others?				
	a. If yes, what percent per month?%				
6.	Do you perform Skip Tracing/Investigative work for others? ☐ Yes ☐ No				
7.	List any associations you are an active member of:				
8.	Are ALL assignments in writing and/or in electronic communication?				
9.	Do you require a written contract with each of your clients prior to repossessing on their behalf?				
10.	Estimated annual number of repossessions done via wrecker / rollback / haul-away				
11.	Estimated annual number of repossessions done via Drive-away				
12.	Are police notified?				
13.	In the event of a hostile debtor, how do you handle?				

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14. Describe your experience in this type of operation (previous employment, years experience, etc.)
15. Do you ever release the vehicle to the debtor? ☐ Yes ☐ No
a. If yes, describe procedures
46. What is the constraint of the first of the constraint of the c
16. What is the average length of time you store a repossessed auto?17. What controls are in place to identify and record existing damage on the vehicle that is being repossessed?
COLLECTION/INVENTORY OF PERSONAL EFFECTS
1. Do you have a written procedure for cataloging items found in the recovered collateral? \square Yes \square No
2. How do you catalog these items? Employee Witnessed Written Inventory Video Camera or Photo Inventory
3. Are the secured via locked storage? ☐ Yes ☐ No
4. How do you dispose of unclaimed items?
☐ Hold for Auction ☐ Other (Explain)
5. Do you turn over illegal substances, firearms or any other applicable items to law enforcement?
5. Bo you turn over inegal substances, in curins of any other applicable items to law emoreciment.
"Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance contain 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." 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 clai containing a false or deceptive statement is guilty of insurance fraud." PENNSYLVANIA "Any person who knowingly and with intent to injure or defraud any insurer files an application or claim containing any false, incomplete misleading information shall, upon conviction, be subject to imprisonment for up to seven years and the payment of a fine of up to \$15,
WEST VIRGINIA "Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information an application for insurance is guilty of a crime and may be subject to fines and confinement in prison."
ALL OTHER STATES "Any person who knowingly and with intent to defraud any insurance company or other person, files an application of insurance contain any false information, or conceals for the purpose of misleading, information concerning any material fact thereto, commits a fraudulen which is a crime."
Applicant understands and agrees that on any proposed addition or substitution of driver, the driver information must be submitted to t insurance company for approval prior to hire.
Applicant
Signature
Date

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