

The PUMP Programs

GAS PUMP SUBMISSION REQUIREMENTS

Completed applications should include:

1. **Complete** Acord Applications including Limits of Insurance & all covered auto symbols.
2. Any optional program enhancement must be on the application or we will not quote it. If specifications on the application are clearly those of another program they will be ignored. Coverage will be per The PUMP Programs.
3. Complete VIN Nos. (There should be 17 digits)
4. Previous carrier information
5. Full Description of operations. If any operations of the insured will be placed elsewhere they should still be described here & noted that coverage is not desired.
6. Zip codes (including Zip codes Garaging Locations on Auto application)
7. Plate Type and Registration Number and/or Copy of Vehicle Registrations plus FEIN for New York Auto.
8. Driver's List to include: Name, Date of birth, License number, and state
9. MVR's for all drivers

Along with the application include:

1. Expiring Premium indication
2. Quote Due Date
3. Five (5) Year Currently Valued Loss Runs
4. New Business GAS PUMP Supplemental Application and any addendums required.
5. Account Submission Summary

Please share this information with all individuals in your office who will be participating in The PUMP Programs.