

The PUMP Programs
GASOLINE TRANSPORTERS AND DISTRIBUTORS
SUPPLEMENTAL APPLICATION

(To be completed and signed by Company Manager)

Insured: _____

(Describe operations and relationship of each named insured completely - use separate sheet).

Insured's Website Address: _____

Insured's DOT Number: _____

Insured's MC Number _____

Do you deliver fuel to marinas? ___Yes ___No

If yes, attach "Marina Fuel Addendum".

Do you haul and/or deliver LP Gas? ___Yes ___No

Do you deliver Aviation, Jet Fuel or Racing Fuel? ___Yes ___No

Do you own/operate any C-Stores, Service Stations, Truck Stops or Other Retail? ___Yes ___No

If yes, attach " Convenience Stores, Service Stations, Truckstops Addendum".

Do you own/operate a Restaurant? ___Yes ___No

If yes, attach "Kitchen/Restaurant Addendum".

Do you own/operate a Hotel or Motel? ___Yes ___No

If yes, attach "Hotel/Motel Addendum".

Do you install/repair/remove underground storage tanks? ___Yes ___No

A. Delivery Operations

1. Does Insured repackage any products? ___Yes ___No

a. If yes, please describe: _____

2. Does Insured alter product? (ie: blend, mix or add additives)? ___Yes ___No

a. If yes, please provide details: _____

3. Any distribution of fuel via **railway/rail cars**? ___Yes ___No

a. If yes, please describe: _____

4. Does operation include any distribution of product by **pipeline**? ___Yes ___No

a. If yes, please describe: _____

5. Do you haul product for others? ____ Yes ____ No

a. **If yes**, what product and who do you haul for?

6. Do you have others haul product for you? ____ Yes ____ No

7. Are Spill Kits on all tank trucks? ____ Yes ____ No

8. Do you have a mandatory policy for the use of wheel chocks? ____ YES ____ NO

B. Tractor Trailers

Number of tractors _____ Number of trailers _____ List the trailers and the product hauled in each:

Description of Trailer (Year, Make, Model)	Product(s) Hauled
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

1. How are drivers paid? Hourly salary ____ Per trip/load ____ Other (specify) _____

a. Average wage for drivers _____

2. Where is the primary terminal(s) where you pick up product? (City, State)

3. Where are the majority of deliveries made using Tractors? (City, State)

4. Identify tractor trailer drivers on the driver list.

5. What is the average tenure for the tractor trailer drivers? _____

6. What is frequency of ordering MVR's? _____

7. What action is taken for unacceptable MVR's? _____

8. Do you ever transport beyond 50 miles? ____ Yes ____ No

a. **If yes**, describe, including maximum distance travelled and the purpose of that trip.

9. What products are hauled by tractor trailer?

Gasoline _____ % Heating Oil/Diesel _____ % Other _____ % Describe: _____

10. Do you ever transfer gasoline from truck to truck? ____Yes ____No

11. How many tractor trailer shifts do you run per day? _____

a. What are the hours of those shifts? _____

12. Do you use owner operators? ____

a. Are their tractors on your auto schedule or do you require they carry their own insurance?

C. Property Leased To Others

1. Do you lease any property to others? ____Yes ____No

a. **If yes**, who are your tenants? _____

2. Do you maintain Certificates of Insurance that confirm General Liability Coverage and name you as Landlord Additional Insured? ____Yes ____No

a. **If yes**, attach copies of Certificates

b. If terminal facilities are leased to others provide a copy of the agreement.

D. Petroleum Storage Facilities

1. Provide a list of all locations storing petroleum products in bulk. Identify the size and product in each tank:

2. Do you have a Written Emergency Plan for fuel leaks and/or fires? ____Yes ____No

a. **If yes**, attach plan.

3. Are Tanks properly marked as to indicate their contents? ____Yes ____No

4. Are Tanks properly grounded during loading and unloading? ____Yes ____No

5. Are electrical switches and lighting explosion proof? ____Yes ____No

6. Are the shut-off valves clearly visible? ____Yes ____No

7. Are lines, meters and pumps tagged or color coded? ____Yes ____No

8. Describe your Fire Fighting Protection on premises (e.g., extinguishers, standpipes, foam equipment sprinklers, hydrants, etc)

9. Distance to responding Fire Department: _____

10. Describe neighboring properties and approximate distance from tanks:

11. Are premises completely fenced? ____Yes ____No

a. **If no**, describe perimeter protection:

12. How would you characterize the neighborhood?

_____ Rural _____ Urban _____ Industrial _____ Residential

13. Do you carry Pollution Liability on your Bulk Plant? _____ Yes _____ No

14. Do others load at your rack? _____ Yes _____ No

b. **If yes**, what type of training do you provide to their drivers?

15. Who delivers or hauls product(s) to your Bulk Plant? _____

E. General Liability Classification

CLASS CODE	DESCRIPTION	EXPOSURE
13204	Residential delivery of Fuel Oil or Kerosene	Gallons
13205	Commercial or bulk delivery of Fuel Oil or Kerosene	Gallons
13205B	Above products brokered, <u>not</u> delivered by insured	Gallons
13205C	Wholesale Fuel Oil or Kerosene picked up by others from Insured's rack	Gallons
13205D	Bulk Lube & Motor Oil Distribution (Delivered by tanker)	Gallons
13205E	Diesel Fleet Fueling or Card Lock facility	Gallons
10070	Auto Supplies Wholesale (including Packaged Bulk Lubes)	Sales
10071	Auto Parts & Supplies (Retail)	Sales
53907	Gasoline or Diesel wholesale or bulk delivered by insured	Gallons
53907B	Gasoline or Diesel brokered, <u>not</u> delivered by insured	Gallons
53907C	Gasoline or Diesel wholesale picked up by others from Insured's rack	Gallons
53907D	Gasoline Fleet Fueling or Card Lock Facility	Gallons
13453	Gas Station full service	Gallons
13454	Gas Station self-service	Gallons
13455	Gas Station full and self-service combined	Gallons
44009	Gas Station leased to others	Rents
18435	Convenience store	Sales
10367	Car wash	Sales
10368	Car wash (customer physically washes their own vehicle)	Sales
13410	LP Gas picked up at Insured locations (for gas grills, etc)	Gallons
10073	Automotive Repair Shops (Please check all that apply): § Top, Body and Upholstery Repair Shops § Paint Shops § Automotive Exhaust System Repair § Automotive Glass Replacement Shops § Automotive Transmission Repair Shops § Automotive Quick Lubrication § Other General Auto Repairs: _____	Sales

List on the ACORD form all other classes that may apply that may or may not be directly related to the petroleum business i.e.: Lessor's Risk Retail, Vacant Land, Dwellings, Apartments, Tire Dealers, Towing, Laundry/Dry Cleaners, Hotels/Motels, Restaurants, etc.

Signature: _____ Position: _____ Date: _____