

Allstar Transportation

Hazmat Supplement

*This form must be completed in addition to the Commercial Auto or Cargo Application if the applicant is **hauling** materials or **has authority** to haul hazardous materials.*

SECTION A – GENERAL INFORMATION

Applicant/Insured:		Submission/Policy #	
Do you have auth to haul HAZMAT:	<input type="checkbox"/> YES <input type="checkbox"/> NO	Do you haul any substance considered HAZARDOUS WASTE:	<input type="checkbox"/> YES <input type="checkbox"/> NO
If “YES”, please attach a copy of your authority to this form.		If “YES”, please explain:	
Do you haul any HAZMAT as defined by the EPA:	<input type="checkbox"/> YES <input type="checkbox"/> NO	If “NO” do you agree to receive written approval from Companion Insurance prior to assuming any full or partial loads:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Applicants Initials:		Date:	

SECTION B – HAZARDOUS OPERATIONS

If you answered yes to questions 3 or 4 in section A, complete this section						
Hazardous Commodity	Hazard Class/Div	Identification Number	% of Total Commodities	Full (F) Partial (P)	If “P” Max %	Describe how commodity is packaged and shipped
Routes Traveled						
From	From	From	From			
To	To	To	To			

SECTION C – SIGNATURES

Any person who knowingly and with intent to defraud any insurance company or representative thereof or who files an application for insurance containing any false information or conceals for the purpose of misleading information concerning any factual material thereto, commits a fraudulent insurance act, which is a crime.

Signature of Applicant/Insured

Date

Signature of agent

Date