

Car Insurance Coverage Checklist- Please complete this form in its entirety. If any question is not clear please call 513-662-7000.

| AUTO LIABILITY EXPOSURES | Yes/No | DETAILS |
|--|--------|---------|
| Will you or any person use your covered vehicles(s) to make deliveries? (Compensated or volunteer deliveries?) | | |
| Are you or any person who uses your covered vehicles(s) a contractor, real estate agent, salesperson, or do you use your vehicle(s) for any business or employment related activities? | | |
| Do you have commercial registration tags on any covered vehicle, or do you have any type of signs or advertisements on any covered vehicle? | | |
| Do you transport children or adults, or clients in your employment? Or for Daycare purposes? (Even if it is occasional?) | | |
| Are there any drivers that live in your home on a part time or full time basis that are <u>not</u> listed on your car insurance policy? If so please list in details. | | |
| Are there any drivers <u>not listed on your car insurance policy</u> who have possession of a covered vehicle or use your vehicles on a regular basis? (Regular basis means another person is using one of your vehicles more than 1 time each month.) | | |
| Do you own an antique or classic car? (Restored car?) | | |
| Have you acquired any vehicles not listed on your auto policy? | | |
| Is any vehicle registered or titled to a business? | | |
| Do you have a company car provided by your employer? | | |
| Are you insuring any vehicles that are not registered or titled in your or your spouse's name? | | |
| Has any vehicle been customized or altered? Or do your vehicles have non-factory installed equipment? | | |
| Do you own travel trailers, RV's, campers, or any trailer? | | |
| Do you own a boat, jet ski, mini bikes, golf carts, ATV's, motorcycles, mopeds, snowmobiles, or a Segway? | | |
| If your car is damaged in a collision, do you want to add reimbursement for car rental or towing and labor? | | |
| If your car is totaled by your insurance company do you want to add loan or lease gap coverage? | | |
| If any driver is a full-time student, do they have a 3.0 GPA? | | |
| Any students at college, over 100 miles from home? Do they have a car in their possession? | | |
| Do you feel that the liability limits that you are choosing for your car insurance will adequately cover your insurance needs? | | |
| Do you want information on an umbrella liability policy? (Gives you \$1 Million or more in EXTRA liability coverage) | | |
| Would you like to discuss your life or disability insurance needs at this time? (You may receive a discount on other insurance products you buy) | | |

I understand that this checklist may not cover every conceivable insurance scenario, but is used as a general guideline to discuss my insurance needs for car insurance. I am confirming that I have answered all the above questions truthfully and to the best of my knowledge.

Name: _____ date: _____