



ENVIRONMENTAL SUPPLEMENT

TRANSPORTATION POLLUTION

Section I: Applicant Information

NAME OF APPLICANT:		DATE:
DOT NUMBER:	WEB ADDRESS:	
Current Auto Pollution Carrier	Current Auto Liability Carrier:	
Are there any Drivers under contract or employment with DUI, DWI or Reckless Driving Convictions? Within the last 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please list driver		

Section II – Vehicle Types

Type	Number	Radius in Miles	Cargo
Private Passenger Auto		<input type="checkbox"/> Less Than 100 <input type="checkbox"/> 100 to 250 <input type="checkbox"/> More Than 250	
Vans (All)		<input type="checkbox"/> Less Than 100 <input type="checkbox"/> 100 to 250 <input type="checkbox"/> More Than 250	
Pickup Trucks		<input type="checkbox"/> Less Than 100 <input type="checkbox"/> 100 to 250 <input type="checkbox"/> More Than 250	
Stake & Flat Bed Trucks		<input type="checkbox"/> Less Than 100 <input type="checkbox"/> 100 to 250 <input type="checkbox"/> More Than 250	
Garbage Trucks		<input type="checkbox"/> Less Than 100 <input type="checkbox"/> 100 to 250 <input type="checkbox"/> More Than 250	
Dump Trucks		<input type="checkbox"/> Less Than 100 <input type="checkbox"/> 100 to 250 <input type="checkbox"/> More Than 250	
Vacuum Trucks		<input type="checkbox"/> Less Than 100 <input type="checkbox"/> 100 to 250 <input type="checkbox"/> More Than 250	
Tractors (Power Units Only)		<input type="checkbox"/> Less Than 100 <input type="checkbox"/> 100 to 250 <input type="checkbox"/> More Than 250	
Farm Tractor		<input type="checkbox"/> Less Than 100 <input type="checkbox"/> 100 to 250 <input type="checkbox"/> More Than 250	
Trailers (Not Attached)		<input type="checkbox"/> Less Than 100 <input type="checkbox"/> 100 to 250 <input type="checkbox"/> More Than 250	

Section III- Cargo Classification

Please Identify Cargo Type	% Bulk	% Packaged	% Drummed	Max Gallons Held
Non Hazardous Material – Solid – Please identify:				
Non Hazardous Material – Liquid – Please identify:				
Hazardous Material – Solid – Please identify:				
Hazardous Material – Liquid – Please identify:				
Hazardous Material – Gas – Please identify:				
Other – Please identify:				

Signature _____
 Title _____
 Date _____