

Roush Insurance Services, Inc.

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Agency _____ Phone _____
Address _____ Fax _____
City _____ State _____ Zip _____

OIL AND GAS COMMERCIAL AUTO SUPPLEMENTAL APPLICATION (Complete in addition to the Commercial Automobile Application)

ANSWER ALL QUESTIONS—IF THEY DO NOT APPLY, INDICATE “NOT APPLICABLE”

Applicant's Name: _____

1. Type of operation (check all appropriate boxes):

- Water hauler (including clean, salt or sludge) Vacuum Truck Hot Shot Trucker for hire
 Site prep/excavation Dump Trucks Frac sand or liquid Oilfield support services/Well maintenance
 Drilling/Rigging/Over the Hole Exposure Frac Tank Rental/Leasing
 Other (describe): _____

2. Describe specific duties you provide for the oil/gas industry: _____

3. Describe all commodities transported (please be specific): _____

4. Does your contract with customers contain an indemnification clause in your favor from well-site ground pollution related claims? Yes No

5. Any transporting of placarded materials? Yes No
If yes, completion of the Hazardous Materials Supplemental is required.

6. Does Applicant have a Pollution policy in force? Yes No
If yes, provide the following:

Policy Number	Carrier	Limits	Term
		\$	

APPLICANT'S NAME AND TITLE: _____

APPLICANT'S SIGNATURE: _____ DATE: _____
(Must be signed by an active owner, partner or executive officer.)

PRODUCER'S SIGNATURE: _____ DATE: _____

AGENT NAME: _____ AGENT LICENSE NUMBER: _____
(Applicable to Florida Agents Only)

IOWA LICENSED AGENT: _____
(Applicable in Iowa Only)