



## Social Service Non-Owned Supplemental Questionnaire

Named Insured \_\_\_\_\_  
Policy Number \_\_\_\_\_  
Policy Period \_\_\_\_\_

1. Any Owned Auto's? **Yes**  **No**
2. Number of Employees \_\_\_\_\_
3. Number of Volunteers \_\_\_\_\_
4. Do the employees or volunteers use their own vehicles on behalf of the insured? **Yes**   
**No**
5. Enter approximate number of employees/volunteers that use their own vehicle for company business:  
Never \_\_\_\_\_  
Occasionally \_\_\_\_\_  
Frequently \_\_\_\_\_

How many drivers *run errands* using their own vehicles for company business?  
\_\_\_\_\_

6. How many drivers *transport clients* in their own vehicles for company business?  
\_\_\_\_\_
7. Do you obtain copies of insurance policies for volunteers and employees who use their own auto? **Yes**  **No**
8. Are these records updated at least yearly? **Yes**  **No**
9. Do you require limits of at least 100/300/100? **Yes**  **No**   
If No, what limits do you require? \_\_\_\_\_
10. Are MVR's checked on volunteers/employees? **Yes**  **No**
11. Do you have a driver safety program? **Yes**  **No**
12. Are seat belts required to be worn by all occupants? **Yes**  **No**
14. In order to obtain non-owned coverage, it is required for your own protection that all employees/volunteers who use their own vehicles regularly maintain personal auto limits of 100/300/100 with a copy of current insurance limits on file with the non-profit. Are you willing to follow this procedure to protect the non-profit? **Yes**  **No**

### Fraud Warning

**Any person who knowingly and with intent to defraud any insurance company or another (NY: other) person files an application for insurance (NY: or statement of claim) containing any materially false information, or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, (NY: and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation) and subjects the person to criminal and civil penalties. In Maine and Virginia, insurance benefits may also be denied.**

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_