



IR UNDERWRITING SERVICES INC.

Trucker Quick Quote Request

transportation@iruws.com

Phone +44 20 74691576

Applicant Name: _____ Business Name: _____

Mailing Address: _____ City: _____ Zip: _____

Garaging Address: _____ City: _____ Zip: _____

Description of commodities hauled: Provide the 4 most common commodities and % of each

_____ % _____ % _____

_____ % _____ % _____

Radius: _____

(Furthest one-way distance in miles)

Will Application be crossing state lines: ☐ Yes ☐ No If

yes, list states entered:

Years Trucking Experience: _____ How many years of prior insurance under the name listed above? _____

PRIOR INSURANCE INFORMATION * 4 years prior continuous

	Eff Dates (month/year)	Company Name	# of claims	Incurred	Premium
Current Year				\$	\$
1 Year prior				\$	\$
2 Years Prior				\$	\$
3 Years Prior				\$	\$

DRIVER SCHEDULE *

3 yrs. verifiable experience with commercial class license required

MVR Activity Last 36 Months

Name	License Class	Date of Birth	Yrs Comm Experience	# Moving Violations	# Non Moving	# Major Violations	# Accidents

Cargo

Filings

Max Value per Load	CA#
\$	MC#
Deductible \$	USDOT#

Refrigeration Breakdown: ☐ Yes ☐ No

Does the applicant use any refrigerated trailers more than 10 years old? ☐ Yes ☐ No

Does Applicant have at least 2 years transporting refrigerated commodities? ☐ Yes ☐ No

Does Applicant ever leave loaded trailers detached from power units or unattended? ☐ Yes ☐ No

TRACTOR/POWER UNIT

Physical Damage

	Year	Make-Model	Body Type	VIN	Stated Value	Deductible
1					\$	\$
2					\$	\$
3					\$	\$
4					\$	\$

Trailers

Physical Damage

	Year	Make-Model	Body Type	VIN	Stated Value	Deductible
1					\$	\$
2					\$	\$
3					\$	\$
4					\$	\$

Is a UIIA/UIIE Endorsement Required? ☐ Yes ☐ No

Trailer Interchange Limit \$	Hired Auto Cost of Hire \$	Non-Owned Auto # of Employees
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