

## Submission Requirements Checklist

Submission Requirement	Primary/Excess Coverage – Requested Within First 10M Layer	Excess – Limits Above the First 10M Layer	Workers' Compensation	Independent Contractors
Completed DMC Application.	✓	✓	✓	✓
Drivers List - Showing name, driver's license number and state, DOB, hire date, and years of experience (Excel preferred).	✓	✓		✓
Company Loss Runs - Current and prior four years for limits up to \$1M, current and prior six years (minimum) for limits above \$1M. Loss runs must be valued within 90 days of the effective date.	✓ Layers below and one layer above the requested layer (10 years preferred)	✓ Layers below and one layer above the requested layer (10 years preferred)	✓	✓ Includes loss runs for Occ Acc, WC, NTL, and Phys Dam coverage
Financials - Consolidated balance sheets and income statements for the current year and the prior two fiscal years (audited for the prior two years, if available). These are not required if a deductible/retention is not requested.	✓	✓	✓	
IFTAs - Four most recent quarters (eight preferred).	✓	✓	✓	
Vehicle List - Including make, model, year, VIN #, stated value, and garaging state (Excel preferred).	✓			
E-mod(s) - For the requested coverage period.			✓	
Payrolls/Employee Counts - Provided by class code and state for the current year, projected year, and the immediate 4 prior years.			✓	
Underlying Tower - Underlying program for all coverages, including carrier, deductibles, and limits for current and 4 prior years.	✓ For Excess Only	✓		
Lease Agreement - A copy of the lease agreement currently used for the Independent Contractors.				✓
Equipment Schedule (Physical Damage submissions only) - A complete list of the Independent Contractor's equipment, including year, make, vehicle identification number, and stated value.				✓
Owner Operators/Subcontractors - Provide projected, current, and 4 prior years of participating # of owner operators and subcontractors separately.				✓
Equipment - Provide projected, current, and 4 prior years of participating # of power units, trailers, and the total insured values by power units and trailers, separately.				✓

\*Primary/ Excess includes trucking fleets with 35 units or more. Primary coverage is provided on a guaranteed cost, deductible, or retention basis. Excess is provided both supported and unsupported above primary coverage.