

## Supplemental Questionnaire – Auto Dismantlers

(This must be completed in addition to the General Supplemental any time there are auto dismantling operations.)

**Named Insured:** \_\_\_\_\_

ARA Certified Automotive Recycler (C.A.R.)?:  Yes  No      Do you follow R2 standards?:  Yes  No

### Dismantling Operation details

Type of units dismantled (Check all applicable):

Private passenger     Light trucks     Medium trucks     Heavy trucks/truck tractors     Extra heavy trucks/truck tractors

Average model year of vehicles dismantled: \_\_\_\_\_

Please indicate revenues for:    Used Auto parts: \_\_\_\_\_      New Auto parts: \_\_\_\_\_

How are parts sold? Show breakdown of sales via percentages (total 100%):

Showroom: \_\_\_\_\_    Drop Shipped: \_\_\_\_\_    Brokerage only: \_\_\_\_\_

Other (describe along with percentage): \_\_\_\_\_

Annual revenues for all operations: \_\_\_\_\_

### Safety controls

Are “Employees Only” signs posted prominently in areas where visitors are prohibited?  Yes  No

Are visitors restricted from walking about the insured’s yard or entering unless accompanied by an employee?  Yes  No

Are there are “No Trespassing” signs displayed on all the perimeter fencing?  Yes  No

Are safety rules posted prominently for customers to see?  Yes  No

Do you post statements banning alcohol and weapons on site?  Yes  No

### Used Auto Sales

Please complete if applicable.

**Please attach a copy of the bill of sale (Mandatory)**

Annual used Car Sales revenues: \_\_\_\_\_

Number of cars per year: \_\_\_\_\_

Who are used cars sold to (i.e.: public, used car dealers, friends, family, employees, etc...)? \_\_\_\_\_

Are cars are sold “as is”?  Yes  No

Are warranties provided?  Yes  No

## U-Pull It Operations

Please complete if applicable.

### Please attach a copy of the liability waiver (Mandatory)

Total annual revenues for u-pull it operations: \_\_\_\_\_

What is the average number of visitors to the premises daily? \_\_\_\_\_

What is the maximum number of visitors to the premises daily? \_\_\_\_\_

Do you require a liability waiver to be signed by the customer?  Yes  No

If so, how long do you store the signed copy?: \_\_\_\_\_

Do you provide a copy of the waiver to the customer?  Yes  No

What is your minimum age for entering this area? \_\_\_\_\_

Do you allow children in this area?  Yes  No

Do you allow pets in this area?  Yes  No

Do you have footwear restrictions in this area?  Yes  No

If so, please describe: \_\_\_\_\_

Is the u-pull its parts/yard restricted to a specific area in the yard?  Yes  No

Is the area fenced?  Yes  No

Are there cameras that cover the entire u-pull it area?  Yes  No

If so: Do they record on a daily basis?  Yes  No

How long are the recorded data kept?  Yes  No

Do you charge a fee to enter the U-pull its area?  Yes  No

Please describe the area and any additional controls (size, lighting, gates that lock, etc.):

Please describe the housekeeping (how are the autos stored, ground surface, etc.):

Are vehicles stacked?  Yes  No

If stacked: How high?  Yes  No      Are the customers allowed near them?  Yes  No

Is the customer supervised while removing parts from vehicles?  Yes  No

If yes, how?



Is there undercarriage access allowed?  Yes  No      Are vehicles on stands or rims?  Yes  No

Are customers allowed to use hand-operated jacks, torches/welders, compressors, or power tools?  Yes  No

Do you provide hand tools to customers?  Yes  No

If so, what types of tools?

Is there an area where vehicles may be lifted so that large parts, such as engines and brake systems, can be removed safely?  Yes  No

Is this work above done by the insured or customer? \_\_\_\_\_

Do you allow the customer to work on their own vehicle on site?  
(I.e.: after customer pulls part, they install into their own vehicle)  Yes  No

### Additional Operations

**Do you do any of the following:**

Auto body work:  Yes  No      Installation or mechanical repair  Yes  No

Towing for others:  Yes  No      Engine or transmission rebuilding:  Yes  No

Offsite car crushing or dismantling:  Yes  No      Rebuilding cars and/or trucks?  Yes  No

Any other operations that are not listed above?  Yes  No

If yes, please describe in detail and provide revenues and safety controls:

Any off-site work picking up autos?  Yes  No

If yes, please describe in detail and provide revenues and safety controls:

**Prepared by:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_

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