DRIVER PROFILE

DRIVER INFORMATION

Name:	
License #:	Date of Birth (MM/DD/YY):
Driver License Class:	Original date of obtaining Driver License for AZ class or class 1

DRIVING EXPERIENCE

How many years experience for driving heavy commercial vehicle:	
Are you currently an (please specify which ever applies): Owner Operator ☐	Driver ☐

TRUCKING COMPANY EMPLOYMENT INFORMATION
> *IMPORTANT*: For each employment experience, please ensure all fields are *completely filled and accurate*

Current Employer where you are driving heavy truck:	
Company Name:	
Address:	
Supervisor's Name:	Phone #:
Employment Start Date:	**Employment End Date:**
	Type of Vehicle(s) most often driven for this employer: Tractor ☐

Past Employer where you drove the heavy truck:	
Company Name:	
Address:	
Supervisor's Name:	Phone #:
Employment Start Date:	**Employment End Date:**
	Type of Vehicle(s) most often driven for this employer: Tractor ☐

Past Employer where you drove the heavy truck:	
Company Name:	
Address:	
Supervisor's Name:	Phone #:
Employment Start Date:	**Employment End Date:**
	Type of Vehicle(s) most often driven for this employer: Tractor ☐

Past Employer where you drove the heavy truck:	
Company Name:	
Address:	
Supervisor's Name:	Phone #:
Employment Start Date:	**Employment End Date:**

	Type of Vehicle(s) most often driven for this employer: Tractor ☐

CLAIMS HISTORY (Please check the box that applies below)

If no claims during last 3 years- Check this box ☐

(Please describe all accidents you were involved in for the last 3 (three) years regardless of fault on heavy commercial vehicles)

Date of accident	Description and location of accident	% of fault	Total amount paid

COMMENTS:

I certify that I personally completed this application and that all of the information is true and correct. With respect to this Driver Profile, or any renewal or change in coverage, I authorize you to collect, use and disclose information as permitted by law for the purposes necessary to assess the risk, investigate and settle claims, and detect and prevent fraud, such as credit information, driving record information and claims history.

_____   _____
Signature of driver   **Date**

_____
Please print your name