



NOTICE OF CHANGE

Transportation Division

May 1, 2006

Transportation – Truck Program

New York

Forms Summary (6/1/06)

Effective: 5/1/06 New Business and 7/1/06 Renewals

Form #/Edition Date	Title	Replaces Edition
N-193 S NY (5/06)	Truck Application	N-193 S NY (1/04)
N-2379 NY (9/05)	Commercial Auto Fleet Insurance Application	N-2379 NY (9/03)

Summary of changes to N-193 S NY (5/06) Truck Application:

- Added Loss Control Services Contact Person information.
- Amended Operations Less Than and Operations Beyond to 100-Mile Radius in lieu of 300-Mile Radius.
- Under Operations Beyond 100 Miles, we removed the Zones leaving blank lines to allow applicant to identify additional metropolitan areas traveled to.
- Added percentage of loads based on radius and requested information regarding longest trip to accurately rate account.
- Added question for sub-haul if permanently leased.
- Reformatted question 8.
- Added questions to determine if: any part of operation is seasonal, any mobile equipment operated, truck insurance under different name (questions 10 – 12).
- Added Trailer Type Legend reference and removed Striped Trailer reference as federal law now requires striped trailers.
- Added election of Deluxe Coverage Endorsement and Expanded Refrigeration.
- Uninsured/Underinsured Motorist and No-Fault Options wording clarified to indicate selection on application is only for quoting purpose and supplemental form must be completed.
- Added Disclosure & Acknowledgment wording for Credit Based Insurance Score.
- Clarify wording from: “my” to “any” motor vehicle report.
- Reformatted signatures lines at the end of the application and requesting printed applicant name.

Summary of changes to N-2379 NY (9/05) Commercial Auto Fleet Insurance Application:

- Under Operations Beyond 300 miles, we removed the Zones leaving blank lines to allow applicant to identify additional metropolitan areas traveled to.
- Added question 15 to determine if insured operates mobile equipment.
- Added election of Expanded Refrigeration.
- Uninsured/Underinsured Motorist and No-Fault Options wording clarified to indicate selection on application is only for quoting purposes and supplemental form must be completed.
- Clarify wording from: “my” to “any” motor vehicle report.
- Reformatted signature lines at the end of the application.

Build Distribution/Information:

Underwriting Guide: 6/06

Rating Software: N/A

Forms Library: N/A

NY0606-F

Please contact your account executive if you have any questions or concerns.

Notice to all recipients: If you receive this notice in error or you need to update recipient information; e.g., add/delete a name or address, please e-mail Carmela Garlow at cgarlow@northlandins.com. Thank you.