

# Canal Submission Clearance Checklist

## 11+ Power Unit Accounts

(Required for all mid-fleet and fleet submissions)

<b>General Agent Name</b>		<b>GA Code</b>		
<b>Retail Agency</b>				
<b>Effective Date</b>		<b>Need By Date</b>		
<b>Insured Name</b> (As it would show on policy)				
<b>DOT Number</b>		<b>MC Number</b>		<b># Power Units</b>
<b>Coverages:</b>	<b>Liability</b>	<b>Physical Damage</b>	<b>Cargo</b>	<b>General Liability</b>

### PLEASE CHECK MARK BELOW ITEMS INCLUDED WITH THIS SUBMISSION

#### REQUIRED TO CLEAR

**Below items required to clear/receive indication. Incomplete checklists will result in clearance being denied.**

Application including Historical Unit Count/Mileage (ACORD WILL NOT BE ACCEPTED)

Equipment List in Excel Format (Must include Year, Make, VIN and Values)

Driver's List in Excel Format (Must include Name, Date of Birth, Date of Hire & CDL Experience)

Loss Runs (current plus 3 years) with valuation date within 90 Days AND Loss Summary

#### REQUIRED TO COMPLETE AND FINALIZE QUOTE

**Upon underwriter request or after receiving indication, the below information will be required.**

100% MVR Sampling (11-50 Power Units) **OR** 50% MVR Sampling (51+ Power Units)

Last 4 Quarters of IFTAs

Safety and Hiring Information

Financial for 51+ Power Unit submission

Additional Information provided by Agent (optional)

#### Comments and Description of Additional Information (if marked above)

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[This checklist does not constitute a binder of coverage or proof of insurance in any form.](#)

#### COMPLETED BY CANAL

Date Received:	Cleared By:	Ops Begin Date:
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