

Chris-Leef General Agency, Inc.
P.O. Box 3747 Shawnee Mission, KS 66203
Phone (913) 631-1232
Fax (913) 631-1128
www.chris-leef.com

AUTO DEALERS ACTS, ERRORS AND OMISSIONS SUPPLEMENTAL APPLICATION
(Complete in addition to the Auto Dealers Application)

Applicant Name: _____

- 1. Coverages:** Truth In Lending/Leasing Title Odometer Insurance Agents
- 2. Acts, Errors and Omissions Limits:** \$100,000 \$300,000 \$500,000 \$1,000,000
- 3. Deductible:** \$1,000 \$2,500 (Financial Statement Required) \$5,000 (Financial Statement Required)

Truth-In-Lending/Leasing

4. Financing Procedures:

- In-House..... % of Sales: _____
- Do you follow Federal, State and Local Truth-in-Lending statutes?..... Yes No
- Is the auto's title transferred into the customer's name at time of possession?..... Yes No
- Is the dealership listed as the lienholder on the title?..... Yes No
- Do you verify customer insurance coverage?..... Yes No
- Do you perform repossessions?..... Yes No
- If yes, attach proof of separate coverage.
- Is insurance verified for independent repossessions firms used?..... Yes No
- Dealer Arranges Financing with Outside Firm..... % of Sales: _____
- Name and title of staff member arranging financing: _____
- Experience of staff member arranging financing: _____
- Do you have in-house approval authority?..... Yes No
- Do you follow Federal, State and Local Truth-in-Lending statutes?..... Yes No
- Do you require final approval prior to releasing the auto?..... Yes No
- Customer Arranges Own Financing..... % of Sales: _____

Odometer Disclosure

5. Verification procedures used for odometer/damage disclosure:

- Carfax or similar industry report on all autos
- Title search on all autos
- Vehicle inspection on all vehicles by:
- In-house ASE certified mechanic
- Independently insured mechanic (Certificate of Insurance must be on file)

6. Describe procedures if prior damage or salvage title is discovered: _____

7. Disclosure procedures used:

- Checklist
- Customer written acknowledgement
- Other: _____

Auto Titling

8. Titling Procedures:

Staff member responsible for DMV paperwork: _____

Experience of staff member: _____

Describe procedure for verification that titles and liens are filed accurately: _____

Insurance Placement

9. Insurance Placement Procedures:

Do you have an insurance agent's license?..... Yes No

What is the minimum A.M. Best rating of the carriers with whom you place business? _____

Name and title of staff member arranging insurance? _____

Experience of staff member: _____

Do all staff members arranging insurance have an agent's license? Yes No

Do you have separate Insurance Agents Errors & Omissions coverage in place?..... Yes No

If yes:

Carrier: _____ Policy Term: _____ Limit of Liability: _____

Refer to the application form for State Fraud Warnings.

APPLICANT'S SIGNATURE: _____ DATE: _____
(Must be signed by an active owner, partner or executive officer.)

PRODUCER'S SIGNATURE: _____ DATE: _____

AGENT NAME: _____ AGENT LICENSE NUMBER: _____
(Applicable to Florida Agents Only)

PRODUCER'S SIGNATURE: _____ DATE: _____