

EQUIPMENT DEALER SUPPLEMENTAL INFORMATION

INSURED NAME:				DATE:		
AGENCY:			AGENT NAME:			
1. About the insured's employees:						
	How many workers do they employ?	What are their ages?	What are their duties?	What are their experience levels?	What is their training?	
2				rtment of Justice Form I-9 for		
3. What is the layout of the insured's premises?4. What are the insured's hours of operations: to						
5. What training and supervision do new or temporary workers receive?						
6. Are all of the insured's mechanics factory-trained, and are they currently certified or in the process of becoming so?						
7. What is the overall condition of all storage areas?						
8. What are the age, condition, and accuracy of all tools and safety equipment (e.g., tire gauges, air hoses, etc.) used in tire inflating, mounting, and balancing?						
9. Are shelves securely fastened to the walls?						
10. Does the dealer have a sufficient amount of floor space and number of display fixtures?						
11. How are machinery and equipment secured? (All heavy machinery must be placed in park and secured by chains.)						
12. Are all parts and equipment stored neatly and securely?						
13. Is the rated load capacity clearly marked on all forklifts?						
					i	



EQUIPMENT DEALER SUPPLEMENTAL INFORMATION

INSURED NAME:	DATE:				
AGENCY:	AGENT NAME:				
14. Are forklifts equipped with overhead protection, such as a roll cage?					
15. Are employees instructed not to exceed the rated c motion?	apacity of any forklift and not to ride on forks while they are in				
16. Are forklifts gas or electric powered?					
17. Carbon monoxide detectors with audible alarms	in operation?				
18. Are mechanics required to brace all wheels with	chocks and place the machinery in park?				
19. Are repairs conducted in areas with adequate space	e and lighting?				
20. What types of forklifts does the insured use?					
21. What precautions do mechanics take on roving rep	pair calls?				
22. Is there adequate room to walk between displayed	machinery?				
23. Is the equipment yard adequately lit?					
24. What is the level of housekeeping?					
25. What type of safety program does the insured have	e in place?				
26. Does the insured have a policy requiring workers t grease?	o use nonflammable absorbent materials to soak up spills of oil or				
27. Are any employees trained in cardio-pulmonary re	suscitation (CPR) or first aid?				
28. Are workers instructed in proper lifting techniques	? (Backbelts should be provided to those who request them.)				
29. What are the types, and condition of personal prote	ective equipment (PPE) issued to the insured's employees?				
28. What measures has the insured taken to enforce the	e use of personal protective equipment?				
29. Are First aid kits readily available throughout the	facility and equipment yard?				