

Benchmark

MANAGEMENT GROUP, INC.

1730 Park Street, Suite 214 Naperville, IL 60563
Phone: (630) 778-7000 Fax: (630) 778-7007

Business Trade Name _____

TOW TRUCK OPERATORS

Operations:

1. Are dogs chained or penned during working hours? Yes No No Dogs
2. What is your radius of operation? 100 miles 300 miles 300+ miles
3. Do you own and use transporter tags? Yes No
4. Have you executed any contracts with hold harmless or waiver of subrogation agreements? If Yes, to whom? Yes No

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5. What percentage of your towing is?
 - a. Private Passenger _____%
 - b. Commercial Truck _____%
 - c. Tractor-Trailer rigs _____%
 6. What percentage of your towing is done for?
 - a. Police Rotation _____%
 - b. Motor Club Contracts _____%
 - c. Municipal Contracts _____%
 - d. Dealer/Repair/Body shops _____%
 - e. Rental Car Contracts _____%
 - f. Repossession _____%
 - g. Individuals _____%

7. Is the storage lot fenced, gated and lighted? Yes No
8. Is storage lot paved and free of weed and brush? Yes No
9. Do you hire out to other operators? If Yes, explain Yes No

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10. Are your vehicles equipped with theft alarms? Yes No
 11. Do you use police scanners to chase accidents? Yes No
 12. Do you perform monthly vehicle safety inspections? Yes No
 13. What is the overall condition of your vehicles? Excellent Good Fair
 14. Do you obtain MVR verification on all drivers? Yes No
 15. Do you employ/use any part time drivers? Yes No
 16. Do you use a towing recovery procedure manual? Yes No
 17. Do you offer safety training classes on a regular basis? Yes No
 18. Is your driver turnover less than 20% a year? Yes No

19. How experienced are your tow truck drivers?

- Age 25+ with 5 years experience, references checked, CDL if needed
- Age 21-24 with 3 years experience, references checked, CDL if needed
- All drivers have a minimum of 2 years experience

20. What type of driver incentive program do you have in place?

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, may be committing a fraudulent insurance act, and may be subject to a civil penalty or fine.

* not applicable in all states

Applicant Signature: _____

Date: ____/____/____