



900 Route 9 North, Suite 503, Woodbridge, NJ 07095
Website: www.NIPGroup.com

Toll-free Phone: (800) 446-7647

LandPro®TreePro™ 15 Passenger Van Questionnaire

Insured: _____

Federal Tax ID # _____ Or Owner's Social Security # _____

List all states that you perform work in _____

1. STAFF

Number of Owners / Partners, Etc. operating 15 passenger vans _____

Number of Employees operating 15 passenger vans _____

2. 15 Passenger Van- Worker Transportation

- Is defensive driving and unique roll –over hazard training provided at the time of hire? Yes No
- Is defensive driver training required annually? Yes No
- Are passengers required to use seatbelts? Yes No
- Does the 15 passenger van pull a trailer or have items loaded on the roof? Yes No
- Are 15 passenger vans always inspected before and after trips? Yes No
- List the maximum speed/miles per hour _____
- List the maximum miles driven one way _____
- Are vehicles equipped with safety items. If yes please describe _____
- Are vehicles equipped with high quality, low mileage, properly inflated tires? Yes No

(Attach a copy of your current license - required for coverage)

Insured Signature: _____ Print Name: _____
 Title: _____ Date Signed: _____