

UBER / LYFT SUPPLEMENT

Vehicle owner supplying a car to another driver



Complete with the Commercial Auto Questionnaire. Owner will not drive. Use N/A if not applicable.

1. Applicant and business arrangement

Applicant / legal vehicle owner

Requested effective date

How will the owner provide the vehicle? Mark all that apply.

☐ Rent / lease to driver ☐ Hire / contract driver ☐ Fleet manager ☐ Other

Who recruits, approves and pays the driver? Name any fleet manager and explain the arrangement.

Owner receives: fixed rent, fare share or other?

Written agreement? Yes / No / Pending; attach if available

2. Platform and vehicle use

Platform(s) and service tier (UberX, XL, Black, etc.)

Program name / approval status for owner and driver

Operating cities / states; airport trips?

Private/off-app rides, delivery or other rental use? Explain

Vehicles now / in 12 months

Miles/year per vehicle

Hours/day; drivers per car

Personal use? By whom?

3. Ownership, custody and drivers

Vehicle / VIN (or refer to attached vehicle schedule)

Titled owner / registered owner, if different

Financed/leased? Lender and permission for this use

Overnight address; who keeps the car and keys?

Driver name(s) / platform approval, or driver not yet selected

Can drivers rotate or substitute? Explain

Provide DOB, license/state, experience and accidents/violations on the main driver schedule.

4. Insurance and supporting documents

Who buys insurance? Current carrier / policy, if any

Who pays repairs and deductibles? Requested limits?

Who provides coverage: app OFF / waiting for request / en route to pickup / passenger on board?

Identify owner, driver, manager or platform for each stage; write Unknown where not confirmed.

Attach available: driver/manager agreement, platform approval, insurance documents and lender permission.

Startup or prior similar operations? Describe experience and any related claims on the main questionnaire.

I confirm the owner will not drive and the information supplied is accurate to the best of my knowledge.

Applicant / authorized representative - signature or typed name

Date

For underwriting review only. Coverage is not bound; eligibility and terms require carrier approval.