

**ADDENDUM
 SALVAGE OPERATION/ SALVAGE TITLED VEHICLES
 AUTO DISMANTLING/REBUILDING OPERATION
 SUPPLEMENTARY INFORMATION**

1. **Named Insured:** _____
2. **Is the salvage yard completely fenced on all four sides?** _____
Describe fence: _____
3. **Is the salvage yard completely separate from the rest of the insured's operation?** _____
4. **Are customers allowed in the salvage area?** _____
If yes, are they accompanied by the Insured &/or Employee? _____
5. **Are customers allowed to pull their own parts?** _____
6. **If insured is a used car dealer, are the cars being sold rebuilt autos from the salvage yard?** _____
If yes, advise: _____% Cosmetic Repair _____% Frame Straightening _____% Structural Repair
 _____% Minor Mechanical Repair _____% Major Engine Repair
7. **What % of vehicles sold are drivable?** _____
8. **If insured is a repair shop, are customer's cars kept in a separate area from the salvage yard?** _____
9. **What percentage of your income comes from:** Car Sales _____% Auto Repair _____%
 Sale of Used Parts _____%
10. **Does the insured own a car crusher?** _____
If yes, is the car crusher kept on the insured's premises? _____
11. **Does the insured crush cars for others?** _____
If yes, is it done on the insured's premises? _____
12. **Are the cars in the salvage yard stacked?** _____ **If yes, how high?** _____
13. **Need a list of all employees that work in conjunction with the salvage yard?** _____
14. **If the insured has had separate insurance (GL/M&C) on the salvage yard, who has the prior insurance carrier been for the past 3 years?** _____
15. **Were there any claims reported?** _____ **If yes, need details and amounts paid.** _____

(Print Applicant's Name)	(Applicant's Signature)	(Date)	
(Agency Name)	(Agency Address)	(Agent's Signature)	(Date)