



Name of Ministry: Huguenot Road Baptist Church  
 Address: 10525 W. Huguenot Road  
 City, State, Zip: N. Chesterfield, VA 23235  
 Policy Number: 45ALA0331622

## Ministry Driver Screening

Driver's name (as shown on license): \_\_\_\_\_

Date of birth: \_\_\_\_\_

SSN: \_\_\_\_\_  
 (Please provide your SSN only if you've given your ministry leader permission to purchase a copy of your driving records.)

Driver's license state and number: \_\_\_\_\_

Is this a commercial driver license?  Yes  No

Which vehicle will you be driving? Dodge Van and Ford Bus

Are you the primary driver?  Yes  No

Primary driver = You drive the vehicle more than once per month or more than 12 times per year.

### In the past three years:

1. Have you been at fault for any accidents?  Yes  No
2. Have you had any moving traffic violations?  Yes  No
3. Have you had any insurance company cancel or refuse to provide you with auto insurance?  Yes  No
4. Have you had your driver's license revoked, suspended, or restricted?  Yes  No
5. Have you had any physical impairments other than corrective glasses?  Yes  No
6. Have you ever been charged with or convicted of "driving while intoxicated" or "driving under the influence"?  Yes  No

If any question(s) 1-6 have been answered with "yes," please provide full details below: (dates, descriptions, amounts, or other explanation)

Signed \_\_\_\_\_

Date \_\_\_\_\_

**Note:** Brotherhood Mutual Insurance Company encourages ministries to adopt a driver selection process by requiring them to name one primary driver per vehicle for commercial auto policies. Use this form as a tool for collecting the information required to complete the *supplemental application form: Commercial Vehicle Driver Information (A 98)*. Complete information for primary drivers will be required to process an application for commercial vehicle coverage.