

SURPLUS LINES MANAGERS, INC.
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Aegis Security Insurance Company

BEST RATING A

RHODE ISLAND MOTORCYCLE APPLICATION

REQUESTED POLICY PERIOD: Effective Date _____ Expiration Date _____ SINGLE _____ / MARRIED _____

| | | | | | |
|--------------------------------|-------------|-----------------|-------|---------------|-------------|
| TITLED OWNER | | AGENCY NAME | | AGENCY CODE # | |
| ADDRESS, CITY, STATE, ZIP CODE | | MAILING ADDRESS | | | |
| COUNTY | TELEPHONE # | CITY | STATE | ZIP CODE | TELEPHONE # |

| | |
|------------|--------|
| LIENHOLDER | LOAN # |
| ADDRESS | |

| | | |
|------------------|---------------|----------------------|
| OPERATOR #1 NAME | DATE OF BIRTH | RI DRIVERS LICENSE # |
| OPERATOR #2 NAME | DATE OF BIRTH | RI DRIVERS LICENSE # |

| | | | | | |
|----------|------|--------------|-------|------|---------------|
| CYCLE #1 | YEAR | MAKE / MODEL | VIN # | CC's | CURRENT VALUE |
| CYCLE #2 | YEAR | MAKE / MODEL | VIN # | CC's | CURRENT VALUE |

REGULAR____ / CRUISER____ / HARLEY____ / HARLEY FL____ / TOUR____ / SPORT TOUR____ / SPORT____

| PREMIUM—RATE ON YOUNGEST OPERATOR | #1 | #2 |
|---|----------|----|
| BODILY INJURY / PROPERTY DAMAGE LIMITS 25/50/25 ____ 50/100/25 ____ 100/300/50 ____ | \$ | \$ |
| COMPREHENSIVE / COLLISION DEDUCTIBLE 100 ____ 250 ____ 500 ____ | \$ | \$ |
| UNINSURED / UNDERINSURED MOTORISTS 25/50 ____ / 50/100 ____ / 100/300 ____ / Rejected ____ | \$ | \$ |
| UNINSURED MOTORISTS PROPERTY DAMAGE 25,000 ____ / Rejected ____ (Sign rejection on back) | \$ | \$ |
| MEDICAL PAYMENTS 2500/5000 ____ / Rejected ____ (Sign rejection on back) | \$ | \$ |
| ACCESSORIES (Describe on separate sheet of paper) | \$ | \$ |
| ROAD RIDER | | |
| SUB TOTAL | \$ | \$ |
| ACCIDENT/VIOLATION POINT FACTOR | \$ | \$ |
| SUB TOTAL | \$ | \$ |
| CREDITS ____% (MAXIMUM CREDITS—50%) | \$ | \$ |
| POLICY FEE | \$ 25.00 | |
| SR22 FILING—\$40 | \$ | |
| TOTAL POLICY PREMIUM | \$ | |

IF NO. DO NOT SUBMIT

Yes ____ No ____ Is the unit garaged when not in use (when other than collision coverage is written)?

Yes ____ No ____ Do you have a valid motorcycle license? A copy of the driver's license showing the motorcycle endorsement MUST be attached to the application.

IF YES. DO NOT SUBMIT

Yes ____ No ____ Is any motorcycle chopped, reconstructed (rebuilt), re-titled, non-factory built or used for exhibition?

Yes ____ No ____ Is any motorcycle used for racing, hill climbing or for business?

Yes ____ No ____ Have you had any of the following violations within the past three (3) years: leaving the scene of an accident, fleeing from police, vehicular homicide, felony or assault with a motor vehicle, racing or excessive speeding, improper use of license or registration, operating a motor vehicle without the owner's consent, careless / improper operation of vehicle, a suspended / revoked license or passing a stopped school bus?

Yes ____ No ____ Have you had more than one (1) alcohol / drug related violation within the past three (3) years?

Yes ____ No ____ Is the motorcycle used for business?

Yes ____ No ____ Is the motorcycle an off road (dirt bike) or an all terrain vehicle (ATV)?

PLEASE READ IMPORTANT NOTICE BELOW:

IF UNINSURED MOTORISTS PROPERTY DAMAGE, UNINSURED BODILY INJURY AND / OR MEDICAL PAYMENTS ARE REJECTED—THE TITLED OWNER'S SIGNATURE IS REQUIRED ON THE REVERSE SIDE OF THIS APPLICATION.

NOTE: The policy is subject to the minimum earned premium shown on the declarations page if the insured requests mid-term cancellation.

| | | |
|----------------------|----------------------|----------------------------|
| PAYMENT IN FULL ____ | 3 PAYMENTS ____ | 4 PAYMENTS ____ |
| | 50% Down / 25% / 25% | 25% Down / 25% / 25% / 25% |

Titled Owner's Signature _____ Date _____

Producer's Signature _____ Date _____

| ACCIDENT (S) / VIOLATION (S) | POINTS |
|--|--------|
| SPEEDING VIOLATION | 1 |
| MINOR VIOLATIONS Any moving violations that DO NOT fall into the major violations listed below: Leaving the scene of an accident Fleeing from police Vehicular Homicide Felony or assault with a motor vehicle Racing Excessive speeding Improper use of license / registration Operating a motor vehicle without the owner's consent Careless or improper operation of a vehicle Passing a school bus | 2 |
| AT-FAULT ACCIDENTS (Over \$750 in damages) | 3 |
| ALCOHOL / DRUG RELATED VIOLATION(S) Driving under the influence of alcohol, drugs, or narcotics Refusing to submit to a alcohol / drug test Open container | 2 |

| ACCIDENT / VIOLATION (S) FACTOR | | | |
|---------------------------------|--------|--------|--------|
| POINTS | FACTOR | POINTS | FACTOR |
| 1 | 1.13 | 5 | 1.67 |
| 2 | 1.25 | 6 | 1.83 |
| 3 | 1.38 | 7 | 2.00 |
| 4 | 1.50 | | |

- INELIGIBLE MOTORCYCLES**
- Motorcycles that are chopped, reconstructed (rebuilt), re-titled, non-factory built or used for exhibition, racing, hill climbs or business purposes
 - Physical damage coverage on motorcycles with accessories valued at more than 50% of the value of the motorcycle without accessories.
 - Motorcycles that are rented
 - Motorcycles with a value of more than \$28,000 (when physical damage is written)
 - Motorcycles with more than two (2) wheels (including ATV and sidecars) except Goldwing conversion and Lehman trike.
 - Motorcycles that are homemade, kit bikes, go-carts, dune buggies, tractors, cushmans, not produced by original equipment manufacturers, composite or cannot be found in the NADA Motorcycle Appraisal Guide
 - Motorcycles re-powered by engine castings not produced by the motorcycle manufacturer
 - Turbo or other performance enhancements
 - Vehicles co-owned by individuals who do not reside in the same household (excludes finance company)
 - Dirt bikes (off road motorcycles)
 - Any ineligible motorcycle listed on the website: www.aegisfirst.com
 - Motorcycles that are not garaged when not in use (applies only when other than collision is written)

- INELIGIBLE OPERATORS**
- Operators who do not have a valid motorcycle license (permits unacceptable)
 - Operators with more than one (1) alcohol / drug related violation within the past three (3) years
 - Operators who have any major violations within the past three (3) years: leaving the scene of an accident, fleeing from police, vehicular homicide, felony or assault with a motor vehicle, racing, excessive speeding, improper use of license / registration, operating a motor vehicle without the owner's consent and careless or improper operation of a vehicle, passing a school bus
 - Operators exceeding seven (7) points
 - Operators with a suspended / revoked license within the past three (3) years
 - Operators with more than one (1) minor moving violation when 100/300 limits of liability for bodily injury are requested

- SPORT PROGRAM**
- May be written with liability coverage only
 - Must be written with minimum liability limits (25/50) only
 - Operators may not have more than one (1) minor violation or any at-fault accidents within the past three (3) years

MVR
The company will obtain an MVR—If the accident and / or violation information given on the front of the application is different than the information found on the MVR, the premium could be increased or if the information makes the risk ineligible, the policy will be null and void.

DRIVERS LICENSE
Coverage is not considered bound unless a clear copy of each operator's drivers license showing the motorcycle endorsement is attached to the application.

VEHICLE IDENTIFICATION NUMBER
Attach a copy of the title, bill of sale or registration card showing the correct vehicle identification number (VIN) to the application.

- CREDITS—MAXIMUM AVAILABLE—50%**
- 10% AGE 55 AND OVER DRIVER TRAINING
Applies when the principal operator is 55 years of age or over and has completed a motor vehicle accident prevention course approved by the Department of Motor Vehicles. The insured shall take an approved course every two (2) years in order to continue to be eligible for the discount.
- 10% MOTORCYCLE SAFETY TRAINING
The applicant must successfully complete a motorcycle safety course certified by the Motorcycle Safety Foundation. A copy of the certificate must be attached to the application to receive the credit.
- 10% VALID MOTORCYCLE ENDORSEMENT
The applicant must have a valid motorcycle license. A copy of their drivers license showing a motorcycle endorsement must be attached to the application to receive this credit.
- 10% MOTORCYCLE ASSOCIATION
The applicant must be a member of an association whose main purpose, as recognized by the insurer, is to promote riding education and safety. A copy of the card must be attached to the application to receive this credit.
- 15% TRANSFER CREDIT
The applicant must have had motorcycle insurance with any insurer anytime within the preceding twelve (12) months. A copy of the motorcycle declaration page or ID card must be attached to receive this credit.
- 10% EXPERIENCED OPERATOR
The applicant must have a minimum of twelve (12) months experience operating a motorcycle. The expiring declarations page or identification card must be attached to the application.
- 15% EXPERIENCED OPERATOR
The applicant must have a minimum of twenty-four (24) months experience operating a motorcycle. The expiring declarations page or identification card must be attached to the application.
- 10% HOMEOWNER INSURANCE
The applicant must own a manufactured home, house, townhouse or condominium to receive this credit. A copy of the current homeowner declarations page must be attached to the application to receive this credit.
- 10% AUTO INSURANCE
The applicant must own or lease and maintain insurance on a car, truck, van or sport utility vehicle. A copy of the current auto declaration page must be attached to the application to receive this credit.
- 3% GARAGED
The vehicle must be garaged when not in use. Applies only if other than collision coverage is written.
- 2% ANTI THEFT
The vehicle must be equipped with an audible alarm or NICB "phantom foot prints". Applies only if other than collision coverage is written.
- 10% MULTI CYCLE—2 motorcycles
- 15% MULTI CYCLE—3 motorcycles
- 25% MULTI CYCLE—4 or more motorcycles
- IMPORTANT NOTE**
- ABOVE LISTED CREDITS WILL NOT BE APPLIED UNLESS REQUIRED DOCUMENTATION LISTED ABOVE IS ATTACHED TO THE APPLICATION.

UNINSURED MOTORISTS BODILY INJURY REJECTION

I have been given the opportunity to purchase Uninsured Motorists Bodily Injury Coverage; however, I elect to exclude this coverage from my policy. This rejection will apply to any subsequent renewal or endorsement of my policy unless I specifically request a change in writing. May be rejected only if the named insured has elected the compulsory liability limits required by law.

Titled Owner's Signature _____ Date _____
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MEDICAL PAYMENTS REJECTION

I have been given the opportunity to purchase Medical Payments; however, I elect to exclude this coverage from my policy. This rejection will apply to any subsequent renewal or endorsement of my policy unless I specifically request a change in writing.

Titled Owner's Signature _____ Date _____
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UNINSURED MOTORISTS PROPERTY DAMAGE REJECTION

I have been given the opportunity to purchase Uninsured Motorists Property Damage Coverage; however, I elect to exclude this coverage from my policy. This rejection will apply to any subsequent renewal or endorsement of my policy unless I specifically request a change in writing.

Titled Owner's Signature _____ Date _____