



WSIB Insurance Agency, LLC
6100 Fairview Drive, Suite 800
Charlotte, NC 28210
866.904.9742

1. Please list all the vehicle types that are used for the driving school and experience.

2. Who owns the vehicles? _____
3. Who maintains the vehicles? _____
4. Do the vehicles driven by customers have any passenger side controls (i.e. brakes) or other modifications to control drivers use?
Yes ☐ No ☐ If yes, please explain _____
5. Are the vehicles fitted with any other additional safety features? Yes ☐ No ☐ If yes, please explain

6. Do Instructors ride with the customers?
Yes ☐ No ☐ If no, please explain when they do not _____
7. What age limit is there as respects who can be in the car during an Experience? _____
8. What age limit is there for participants driving the car? _____
9. Do you require a valid driver's license in order to operate vehicles during an Experience? Yes ☐ No ☐
10. Is any form of Breathalyzer administered before allowing a driver to enter a vehicle for an on track experience?
Yes ☐ No ☐
11. Is the waiver being signed by a participant being provided by the insurance company? Yes ☐ No ☐
12. Are there limitations on maximum speeds allowed? Yes ☐ No ☐ If Yes, please
provide _____
13. On what type of tracks do these experiences take place? Oval: Yes ☐ No ☐ Road Course: Yes ☐ No ☐
Temporary: Yes ☐ No ☐ Public Roads: Yes ☐ No ☐ Parking Lot: Yes ☐ No ☐

I understand that the insurance company in determining whether to provide a quotation for insurance coverage will rely on the information contained in the questionnaire and all other information being submitted. I hereby warrant, represent and confirm that, to the best of my knowledge, all information provided is complete, true and correct.

Applicant's Signature

Producer's Signature (if applicable)

Applicant's Name (Print)

Producer's Name (Print)

Date (MM/DD/YY)

Date (MM/DD/YY)

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