



Underwritten by American Access Casualty Company

STATEMENT OF NON-BUSINESS AND NON-ARTISAN USE

Words appearing in this form in bold print are defined in **your** policy. Please see **your** policy for complete definitions of the terms shown in bold print.

No coverage is provided under this policy for an **accident** or **loss** arising out of the **use** of a vehicle in the course of any **business**.

This policy shall provide no coverage while:

- 1. A **covered auto** is being operated by anyone for **business** purposes;
- 2. The insured is operating any motor vehicle for **business** purposes; or
- 3. The insured is operating any motor vehicle titled to a business, corporation or partnership.

This policy shall provide no coverage for any motor vehicle **used** for the benefit of any business or commercial enterprise and includes the following:

- 1. The **use** of a motor vehicle for hire or compensation, including:
 - a. To a covered auto while being used to carry persons or property for compensation or a fee. This exclusion applies to, but is not limited to, the wholesale or retail delivery of goods, magazines, newspapers, food, or any other products. This exclusion also applies to the use of an auto to provide transportation network company services or while being operated or used by a person while acting as, or engaged in any manner as, a TNC driver. This exclusion does not apply to shared-expense car pools.
 - b. To a covered auto while being used to plow or remove snow for compensation or a fee.
 - c. Arising out of the ownership or use of a vehicle in the course of any business.

Notwithstanding any other provisions of the policy, it is agreed that no coverage is afforded under this policy to any claim or suit arising out of an **auto** used in the course of any **business** or occupation, unless you have declared that **business use** and paid the required premium for it.

MUST BE SIGNED BY APPLICANTS WHO ARE BUSINESS OWNERS, SELF-EMPLOYED, OR TRADESPERSONS

I hereby state that each vehicle listed on this app and any renewal thereof, is not used for business		ted or endorsed to	o my policy at any time,
Signature of Applicant	_	Date	
Policy Number:			

Applicant Name:

App ID Number: