



## Trucking Industry Reference Form

**This section is to be filled out by the applicant.**

Reference Full Name: \_\_\_\_\_

Reference Company Name: \_\_\_\_\_

Reference City and State: \_\_\_\_\_

Reference Email: \_\_\_\_\_

Reference Phone Number: \_\_\_\_\_

1. Types of Cases you are handling:

Trucking Liability  Cargo  Trucking Coverage  Trucking Worker's Compensation

2. Number of Current/Active Cases: \_\_\_\_\_

3. Number of closed files handled in the past year: \_\_\_\_\_

4. What percentage of your overall practice is generated for this reference (in percent %)? \_\_\_\_\_

**This section is to be filled out by the reference.**

How long have you done business with the applicant? \_\_\_\_\_

How many cases per year, on average, do you send to the applicant? \_\_\_\_\_

Of those OPEN cases, please list the number and brief description by each case type:

# \_\_\_\_\_ Trucking Cases: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# \_\_\_\_\_ Cargo Cases: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# \_\_\_\_\_ Coverage Cases: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# \_\_\_\_\_ Worker's Compensation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How would you characterize the way in which the applicant handles your cases?

Would you use the applicant again?  Yes  No

Would you recommend the applicant for membership in TIDA?  Yes  No

Reference Signature:

\_\_\_\_\_