

LIABILITY COVERAGE FOR LEASED OR HIRED VEHICLES

If a parish//school/institution plans to sponsor a trip that requires the leasing or hiring of a vehicle to transport individuals, the following steps are needed:

1. Make copy of this form (Form E-1).
2. Fill out and fax a copy **at least 48 hours in advance to each** of the following:

Member Services
 Catholic Mutual Group
 10843 Old Mill Rd.
 Omaha, NE 68154

FAX Number: 402-551-2943

Office of Administration
 McRaith Catholic Center
 600 Locust Street
 Owensboro, KY 42301-2130

FAX Number: 270-683-6883

3. Form needs to be completed and faxed or mailed 4 to 7 days prior to the event. This will give Catholic Mutual sufficient time to run a MVR if needed.
4. This will extend insurance to the hired and non-owned coverage to the locations sending in the information.

** It is important that the Diocese of Owensboro have a record of all hired or leased vehicles.

DIOCESE OF OWENSBORO
AUTO LIABILITY RENTAL COVERAGE INFORMATION SHEET
TERM 6/01/____ TO 5/31/____

Parish/School/Institution Name: _____

Address: _____

Driver Information:

Name on License: _____

Date of Birth: _____

Driver's License #: _____

State: _____

Dates of Rental: _____

Purpose: _____

This form is used for situations where parishes/schools/institutions do not have vehicles covered on the Diocesan Master Auto Coverage and need liability for a rental vehicle.