

**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**

Sr. Joseph Angela Boone  
 Catholic Pastoral 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.

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**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.**