



PASSENGER SIGN-UP APPLICATION, RULES AND PROCEDURES

1. Make sure you read and understand the following procedures. Driving with an unauthorized passenger is a Team Rule/ Owner Operator Safety Reminder violation. The DOT requires that passengers in property carrying commercial vehicles be authorized. The Company requires a passenger to carry a signed authorization card at all times while in equipment operating under Knight's DOT Number. **Coverage is only valid while Driver/Contractor is employed by or contracted to Knight.**
2. All Driving Associates after 30 days of service are eligible to apply for permission to transport a qualified Passenger. Requests must be reviewed and approved by the Corporate Safety Team. Permission is a privilege, not a right or expectation. For a passenger to be approved and qualified, the following conditions must be met:
 - a. The passenger must be related to the Driving Associate or must have an established relationship with the Driving Associate that would provide a compelling justification for allowing the passenger to be transported in equipment operating under Knight's DOT Number. Example: we would not qualify a stranger or a person that does not already have an established relationship with the Driving Associate.
 - b. The passenger must be physically, mentally, and emotionally competent and able to fully care for themselves while on the truck.
 - c. Any passenger under the age of 18 must be related to the Driving Associate. Passengers under age 12 will not be permitted.
 - d. The passenger must not have a history of criminal behavior.
 - e. The passenger must abide by the terms of the Passenger Agreement.
 - f. Passenger, if female, is not now pregnant and agrees to inform Knight immediately upon learning that she is pregnant. The passenger's authorization to ride in the truck shall be immediately revoked upon knowledge of such pregnancy.
3. Plan ahead. If a Driving Associate wishes to transport a passenger, the passenger must complete the Passenger Agreement, sign the agreement and the Insurance Enrollment form must be forwarded to Corporate Safety prior to commencement of riding privileges. The passenger must be approved by Corporate Safety and received an authorization card signed by the Service Center Manager prior to beginning transportation.
4. Attached, you will find the necessary forms to enable the Driving Associate to transport a passenger. The forms must be filled out completely and returned to Corporate Safety, along with the required documents.
5. Upon receipt of the completed forms, your request will be reviewed. If approved, you will receive an authorization card. The card must be carried by the passenger at all times while riding in the vehicle.
6. **The passenger authorization card will have an expiration date printed on it and will only be valid for as many months as you purchase insurance up to a maximum of 12 months at a time.**
7. **Coverage for this program is provided through an annual master Passenger Accident Protection Plan, which may be subject to premium rate changes. In the event of a rate change, any additional premium owed will be collected upon renewal of the policy.**
8. **Premium will be collected 100% up-front for dates selected. The premium will be non-refundable regardless of termination of employment/contract or voluntary resignation, or whether the passenger rides on the truck.**
9. Driving Associates/Contractors are required to purchase accidental death and dismemberment insurance coverage (the "Rider Policy"), through Knight for all passengers (including spouse). The insurance coverage is not optional. A passenger will not be authorized unless the Driving Associate/Contractor requesting to transport the passenger purchases the Rider Policy through the Company.
10. An insurance form must be filled out listing the names of any passengers that you request to take with you along with the date(s) during which you want the passenger(s) to ride. Under no circumstances will a passenger be allowed on a vehicle without insurance and a current passenger authorization card. If the passenger is not on the insurance form, they will not be allowed on the vehicle.
11. Once the passenger authorization card has been issued, the passenger may ride with you as long as you, the Driving Associate/Contractor have purchased the Rider Policy, and the passenger has a current passenger authorization card.
12. **NO MORE THAN ONE PASSENGER IS PERMITTED IN THE VEHICLE AT ONE TIME EVEN IF MORE THAN ONE PASSENGER IS ENROLLED FOR A DRIVER.**
13. The passenger authorization card is the property of Knight and must be surrendered upon the request of Knight.
14. **Any Driving Associate who transports any person in a vehicle without a passenger authorization card, or without insurance will be subject to discipline, up to and including discharge or contract termination.**
15. Any conduct on the part of the passenger or the Driving Associate that does not meet Company expectations or rules or which poses a safety or security hazard will result in revocation of the riding privilege.
16. If the passenger has an authorized card but no longer meets the requirements listed above it is the responsibility of the driving associate/contractor to notify the Corporate Safety department immediately upon becoming aware of the change.



ACE AMERICAN INSURANCE COMPANY

Passenger Accident Protection Plan
Passenger Reporting Form
Policy Number: TOC N10886910
Policy Holder: Knight Transportation, Inc.

Date: _____

Employee/Contractor Name: _____ Email: _____
Driver Code/Tractor #: _____ Phone Number: _____

Name of Passenger _____ Relationship of Passenger to Employee/Contractor _____

Premium Rate \$20.00 per passenger per month. Knight Admin fee \$6.00 per passenger per month. Aon Admin fee \$2.00 per passenger per month.

Total Cost of Insurance: \$28.00 per passenger per month

Requested Start Date of Coverage: _____

Select Duration of Coverage:

- 1 Month - \$28
- 3 Months - \$84
- 6 Months - \$168
- 12 Months - \$336

Beneficiary Designation:

Passenger Aged 18 or over Names the below as His or Her Beneficiary for Accidental Death Benefits:

Relationship of the Beneficiary to the Passenger: _____

If Passenger is a Minor under age 18, Accidental Death benefits are payable to the parent, guardian, or other person actually supporting him or her.

I hereby request coverage for the above-named individual(s) and authorize payroll deduction for the same.

Employee/Contractor Signature: _____ Date: _____

Please submit the completed forms to your driver leader to sign.

Knight Driver Leader Signature: _____ Date: _____

Driver Leader – After signing, please submit forms to Safety Department for final review

Safety Consultant/Senior Safety Director Signature: _____ Date: _____