



INSURANCE APPLICATION

GENERAL INFORMATION

FEIN / TAX ID#: _____
 (SS# if Sole Prop.) _____

Name(s) of Insured: _____ Yrs in Biz: _____

Mailing Address: _____ Yrs Exp: _____

City, State, Zip: _____

Web Site: _____ Phone: _____

Contact: _____ Fax: _____

Title: _____ Mobile: _____

Email: _____ Other: _____

PREVIOUS CARRIERS	Num # Claims	Amt \$ Claim	BriefDescription Claim	Date Claim
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

DETAILED DESCRIPTION OF THE INSURED'S OPERATIONS

ANNUAL GROSS SALES FOR EACH OPERATION

CONTRACTORS ONLY

Type of Work Performed: _____

% Commercial: _____ % Residential: _____

COMMERCIAL UMBRELLA LIMIT DESIRED: \$ _____

WORKERS COMPENSATION:

# Emp	Description of Work Performed	Annual Payroll

CORPORATE OFFICERS

Name	Title	% Own	Duties	Payroll

PROPERTY SCHEDULE OF VALUES AND UNDERWRITING INFORMATION:

If more than 1 Locations, Please complete additional location chart

LOCATION 1 _____
 LOCATION 2 _____
 LOCATION 3 _____

	LOC 1 INFO	LOC 2 INFO
Building Value (if owned)		
Business Personal Property / Contents		
* EDP / Computers:		
* Business Income / Extra Expense		
Deductible		
* Building Construction CODE		
*Building Occupancy Type		
Year Built		
Year Updates Elec Heat Roof		
Own or Lease		
Sq. Ft. you Occupy		
Total Sq. Ft. Bldg		
# Stories		
Sprinklered		
Fire /Burglar Alarm		
Hours of Operation		

DEF TERMS:

Electronic Data Processing Coverage: computers, programs, and data cover. Typically includes coverage for property is especially susceptible: mechanical breakdown, electrical injury, and changes in temperature and humidity.

Business Income Coverage: covering loss of income suffered by a business when damage to its premises by a covered cause of loss.

Building Construction CODE

1. Frame: Wood Construction
2. Joisted Masonry: Adobe, Brick, Concrete walls – Floors and roof combustible
3. Non-Combustible: Walls, Floors and Roof supported by metal, gypsum or other noncombustible materials
4. Masonry Non-Combustible: Walls are Joisted Masonry but Floor and Roof are Metal or other Non-Combustible
5. Modified Fire Resistive: Code 4 construction but fire resistance rating of more than 1 hour but less than 2 hours
6. Fire Resistive: Same as Code 5 with fire resistance rating of at least 2 hours.

Building Occupancy Type:

Residential, Mercantile, Office/Mercantile, Industrial

MISCELLANEOUS INFORMATION OR COVERAGE REQUIREMENTS:

ADDITIONAL INSURED OR MORTGAGE HOLDER:

Interest _____
 Name _____
 Address _____
 Interest _____
 Name _____
 Address _____