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PROPERTY APPLICATION

GENERAL INFORMATION

- 1.1 Applicant legal business name: _____ Phone: _____
Mailing Address: _____
Business Address: _____ County: _____
- 1.2 Number of years at this location: _____
- 1.3 Name & address of loss payee: _____

PROPERTY SECTION

MUST INSURE FOR 100% OF THE REPLACEMENT COST

- 2.1 Age of building: _____ Construction: _____ Number of stories: _____
- 2.2 If building is over 20 years old, when were the following upgraded? (*required)
*Roof: _____ *Plumbing: _____ *Wiring: _____ Sprinklered: _____
- 2.3 Square Footage of business: _____ Central Station Burglar alarm? _____
- 2.4 Other Occupancies in building? (Describe) _____
- 2.5 Adjoining Occupancies - LEFT: _____ RIGHT: _____
- 2.6 Approximate distance from fire station: _____ Distance from fire hydrant: _____
- 2.7 Do you sell clothing? Yes No If yes, Inventory Value: \$ _____
- 2.8 Do you sell smoke shop items such as water pipes? Yes No If yes, Inventory Value: \$ _____
- 2.9 Do you sell or use jewelry? Yes No If yes, Jewelry Value: \$ _____

COVERAGE DESIRED

CONTENTS - Limit needed: _____
Tattoo and/or Piercing shop: Theft coverage? Yes No
Flash Limit over \$2500? Yes No If yes, Total limit: _____

EARNINGS - Limit needed: _____ For what period? _____

GLASS - Yes No Maximum Limit \$2,500 - DEDUCTIBLE \$100.

SIGN - Limit needed: _____ DEDUCTIBLE \$100.

CLAIMS

- 3.1 List all property claims in the past 5 years, whether or not insured:
- 3.2 Current property insurance carrier, policy number: _____

SIGNED: _____ **DATE:** _____