

**General Information**

Business Entity	FEIN #		
Named Insured	Insured Phone Number		
Contact			
Mailing Address	Insured Phone Number		
City	State	Zip	County
Property Address (Same as Mailing Address?)			
Address			
City	State	Zip	County
Effective Date			
Description of Business			

Years in Business	Number of Employees		
Insurance in Force Now?	Carrier	Premium	
Account Ever Non-renewed?			
If ever non-renewed, please give reason			

**Loss Information**

Building Limit	Deductible
Contents Limit	Deductible
Liability Limit	Number of Employees
Other Occupants and % of building occupied	

Number of Apartments	Construction	Prot. Class		
Year Built	# of Units per Fire Division	# of Stories		
Building Square Feet	Square Feet Insured			
Deductible				
YEARS UPDATED	Heating	Plumbing	Electrical	Roof
Gross sales/receipts	Rental Income	Employee Payroll		
Delivery?				
ALARMS	Central Station	Fire	Burglar	Sprinklered
Distance to Water	Pool	Underground Fuel Tank		
Fryolators	Flat Roof			
Sales of Gasoline	% Receipts	# Pumps		
Installation, Servicing or Repair	% Done			

**Additional Coverages and Limits**

Money & Securities	Sign	Spoilage
Maintenance Agreement	Accounts Receivable	Glass
Valuable Papers	Hired & Non-owned	Computer
Equipment Breakdown	Boiler	Off Premises Power Failure
Professional Liability	Employee Dishonesty	
Condos - D&O	# of Units	% of units occupied by tenants
E&O	D&O	EPLI
EBL		

**Additional Coverages and Pertinent Information**

Narrative/Comments
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