



COMMERCIAL INSURANCE APPLICATION APPLICANT INFORMATION SECTION

DATE (MM/DD/YY)

PRODUCER		PHONE (A/C, No, Ext):	CARRIER	UNDERWRITER
POLICIES OR PROGRAM REQUESTED				
CODE:		SUB CODE:	INDICATE SECTIONS ATTACHED	
AGENCY CUSTOMER ID			PROPERTY	EQUIPMENT FLOATER
			GLASS AND SIGN	INSTALLATION/BUILDERS RISK
			ACCOUNTS RECEIVABLE/ VALUABLE PAPERS	ELECTRONIC DATA PROC
			CRIME/MISCELLANEOUS CRIME	COMMERCIAL GENERAL LIABILITY
			TRANSPORTATION/ MOTOR TRUCK CARGO	BUSINESS AUTO
				TRUCKERS
				GARAGE AND DEALERS
				VEHICLE SCHEDULE
				BOILER & MACHINERY
				WORKERS COMPENSATION
				UMBRELLA

STATUS OF SUBMISSION		PACKAGE POLICY INFORMATION				
<input type="checkbox"/> QUOTE	<input type="checkbox"/> ISSUE POLICY	ENTER THIS INFORMATION WHEN COMMON DATES AND TERMS APPLY TO SEVERAL LINES, OR FOR MONOLINE POLICIES.				
BOUND (Give Date and/or Attach Copy):		PROPOSED EFF DATE	PROPOSED EXP DATE	BILLING PLAN	PAYMENT PLAN	AUDIT
DATE	TIME			DIRECT BILL		
				AGENCY BILL		

APPLICANT INFORMATION
NAME (First Named Insured & Other Named Insureds)

MAILING ADDRESS (of First Named Insured)

INDIVIDUAL	CORPORATION	SUBCHAPTER "S" CORPORATION	NOT FOR PROFIT ORGANIZATION	YEARS IN BUSINESS
PARTNERSHIP	JOINT VENTURE			

INSPECTION CONTACT	PHONE (A/C, No, Ext):	ACCOUNTING RECORDS CONTACT	PHONE (A/C, No, Ext):
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PREMISES INFORMATION

LOC #	BLD #	STREET, CITY, COUNTY, STATE, ZIP CODE	CITY LIMITS	INTEREST	YR BUILT	PART OCCUPIED
			INSIDE	OWNER		
			OUTSIDE	TENANT		
			INSIDE	OWNER		
			OUTSIDE	TENANT		
			INSIDE	OWNER		
			OUTSIDE	TENANT		

NATURE OF BUSINESS/DESCRIPTION OF OPERATIONS BY PREMISE(S)

GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES	YES	NO	EXPLAIN ALL "YES" RESPONSES	YES	NO
1. IS THE APPLICANT A SUBSIDIARY OF ANOTHER ENTITY OR DOES THE APPLICANT HAVE ANY SUBSIDIARIES?			4. ANY CATASTROPHE EXPOSURE?		
2. IS A FORMAL SAFETY PROGRAM IN OPERATION?			5. ANY OTHER INSURANCE WITH THIS COMPANY OR BEING SUBMITTED?		
3. ANY EXPOSURE TO FLAMMABLES, EXPLOSIVES, CHEMICALS?			6. ANY POLICY OR COVERAGE DECLINED, CANCELLED OR NON-RENEWED DURING THE PRIOR 3 YEARS?		

REMARKS

APPLICANT'S SIGNATURE	PRODUCER'S SIGNATURE
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