# PROPERTY SECTION

DATE (MM/DD/YYYY)

| AGENCY | PHONE (A/C, No, Ext): / FAX (A/C, No): | APPLICANT (First Named Insured) |
|---|---|---|

| EFFECTIVE DATE | EXPIRATION DATE | | DIRECT BILL / AGENCY BILL | PAYMENT PLAN | AUDIT |
|---|---|---|---|---|---|
| | | | | | |

CODE: | SUB CODE:

AGENCY CUSTOMER ID:

FOR COMPANY USE ONLY

## PREMISES INFORMATION

PREMISES #: | STREET ADDRESS:

BUILDING #: | BLDG DESCRIPTION:

| SUBJECT OF INSURANCE | AMOUNT | COINS % | VALUATION | CAUSES OF LOSS | INFLATION GUARD % | DEDUCTIBLE(S) | BLKT # | FORMS AND CONDITIONS TO APPLY |
|---|---|---|---|---|---|---|---|---|
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ADDITIONAL INFORMATION | BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810 | VALUE REPORTING INFORMATION - Attach ACORD 811

## ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION

| SPOILAGE COVERAGE | DESCRIPTION OF PROPERTY COVERED | LIMIT | DEDUCTIBLE | REFRIG MAINT AGREEMENT | OPTIONS |
|---|---|---|---|---|---|
| YES NO | | $ | $ | YES NO | |

| CONSTRUCTION TYPE | DISTANCE TO HYDRANT (FT) | DISTANCE TO FIRE STAT (MI) | FIRE DISTRICT/CODE NUMBER | PROT CL | # STORIES | # BASM'TS | YR BUILT | TOTAL AREA |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |

BUILDING IMPROVEMENTS
- WIRING, YR:
- PLUMBING, YR:
- ROOFING, YR:
- HEATING, YR:
- OTHER: YR:

| BLDG CODE GRADE | TAX CODE | ROOF TYPE | OTHER OCCUPANCIES |
|---|---|---|---|
| | | | |

WIND CLASS: RESISTIVE / SEMI-RESISTIVE / OTHER

HEATING BOILER ON PREMISES? YES NO

IF YES, IS INSURANCE PLACED ELSEWHERE? YES NO

| RIGHT EXPOSURE & DISTANCE | LEFT EXPOSURE & DISTANCE | FRONT EXPOSURE & DISTANCE | REAR EXPOSURE & DISTANCE |
|---|---|---|---|
| | | | |

| BURGLAR ALARM TYPE | CERTIFICATE # | EXPIRATION DATE | |
|---|---|---|---|
| | | | CENTRAL STATION / WITH KEYS |

| BURGLAR ALARM INSTALLED AND SERVICED BY | EXTENT | GRADE | # GUARDS/WATCHMEN | |
|---|---|---|---|---|
| | | | | CLOCK HOURLY |

| PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2/Chemical Systems) | % SPRNK | FIRE ALARM MANUFACTURER | |
|---|---|---|---|
| | | | CENTRAL STATION / LOCAL GONG |

## ADDITIONAL INTERESTS

| RANK: | NAME AND ADDRESS: | REFERENCE #: | CERTIFICATE REQUIRED | INTEREST IN ITEM NUMBER |
|---|---|---|---|---|
| INTEREST: LOSS PAYEE / MORT-GAGEE | | | | LOCATION: BUILDING: / SCHEDULED ITEM NUMBER: / OTHER: |
| | ITEM DESCRIPTION: | | | |

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## ADDITIONAL PREMISES INFORMATION

| PREMISES #: | STREET ADDRESS: |
|---|---|
| BUILDING #: | BLDG DESCRIPTION: |

| SUBJECT OF INSURANCE | AMOUNT | COINS % | VALUATION | CAUSES OF LOSS | INFLATION GUARD % | DEDUCTIBLE(S) | BLKT # | FORMS AND CONDITIONS TO APPLY |
|---|---|---|---|---|---|---|---|---|
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ADDITIONAL INFORMATION ☐ BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810 ☐ VALUE REPORTING INFORMATION - Attach ACORD 811

## ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION

| SPOILAGE COVERAGE | DESCRIPTION OF PROPERTY COVERED | LIMIT | DEDUCTIBLE | REFRIG MAINT AGREEMENT | OPTIONS |
|---|---|---|---|---|---|
| ☐ YES ☐ NO | | $ | $ | ☐ YES ☐ NO | |

| CONSTRUCTION TYPE | DISTANCE TO HYDRANT FT | DISTANCE TO FIRE STAT MI | FIRE DISTRICT/CODE NUMBER | PROT CL | # STORIES | # BASM'TS | YR BUILT | TOTAL AREA |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |

**BUILDING IMPROVEMENTS**
☐ WIRING, YR: ☐ PLUMBING, YR:
☐ ROOFING, YR: ☐ HEATING, YR:
☐ OTHER: YR:

| BLDG CODE GRADE | TAX CODE | ROOF TYPE | OTHER OCCUPANCIES |
|---|---|---|---|
| | | | |

**WIND CLASS** ☐ RESISTIVE ☐ SEMI-RESISTIVE ☐ OTHER

HEATING BOILER ON PREMISES? ☐ YES ☐ NO
IF YES, IS INSURANCE PLACED ELSEWHERE? ☐ YES ☐ NO

| RIGHT EXPOSURE & DISTANCE | LEFT EXPOSURE & DISTANCE | FRONT EXPOSURE & DISTANCE | REAR EXPOSURE & DISTANCE |
|---|---|---|---|
| | | | |

| BURGLAR ALARM TYPE | CERTIFICATE # | EXPIRATION DATE | |
|---|---|---|---|
| | | | ☐ CENTRAL STATION<br>☐ WITH KEYS |

| BURGLAR ALARM INSTALLED AND SERVICED BY | EXTENT | GRADE | # GUARDS/WATCHMEN | |
|---|---|---|---|---|
| | | | | ☐ CLOCK HOURLY<br>☐ |

| PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2/Chemical Systems) | % SPRNK | FIRE ALARM MANUFACTURER | |
|---|---|---|---|
| | | | ☐ CENTRAL STATION<br>☐ LOCAL GONG |

## ADDITIONAL INTERESTS

| RANK: | NAME AND ADDRESS: | REFERENCE #: | ☐ CERTIFICATE REQUIRED | INTEREST IN ITEM NUMBER |
|---|---|---|---|---|
| INTEREST<br>☐ LOSS PAYEE<br>☐ MORT-GAGEE<br>☐ | | | | LOCATION: BUILDING:<br>SCHEDULED ITEM NUMBER:<br>OTHER: |
| | ITEM DESCRIPTION: | | | |

## REMARKS

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, HI, MA, NE, OH, OK, OR or VT; in DC, LA, ME, TN, VA and WA insurance benefits may also be denied)