



Customer Name: _____

Nature of Business: _____

Coverage	No Exposure	Coverage- Reviewed Accepted	Coverage- Reviewed Not Accepted
Automobile			
Bodily Injury Limits			
PIP (Med/Wage)			
Uninsured/Underinsured			
Limited Property Damage			
Comprehensive			
Full Glass Coverage			
Collision (Broad, Regular, Limited)			
Customizing Equipment			
Rental Reimbursement			
Roadside Assistance/Towing			
Loan/Lease Gap			
Snow Plow/Cap			
Rental Car Coverage (Gaps)			
Property Form: Ded:			
Location #1 Property			
Business Personal Property			
Business Income & Extra Expense			
Location #2 Property			
Business Personal Property			
Business Income & Extra Expense			
Ordinance or Law Coverage			
Inland Marine			
Tools/Equipment			
Statues/Signs			
Contractors Equipment			
Liability			
General Liability			
Cyber Liability			
Professional Liability			
Hired/Non Owned Liability			
Rec Vehicles, Golf Carts, Tractor			
Employment Practices Liability			
Bonds			
Workers Compensation			
Umbrella			
Limit of Liability			
Flood			
Life Insurance – Buy/Sell			
Employee Benefits			



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Property Inspection Acknowledgement: I understand my insurance company may hire an inspector to inspect my property. Once the inspection has been completed, if differences exist, my insurance company may update my policy to reflect the inspection report results. In addition, if they inspection notes significant issues in regards to the condition of my property, or in which do not meet the underwriting guidelines, my insurance company may provide time to correct the condition(s) to avoid possible termination of the policy.

Additional Drivers: All drivers and regular operators have been disclosed and are listed on the signed application. I understand it is my responsibility to report any additional drivers or any other material changes within 30 days. I also understand that failure to do so could result in a denied claim.

Named Insured Signature

Date

Agent Signature

Date