

## **Commercial Inland Marine Application**

(Including Agr. Mach., Bailee's Customers, Golf Carts, Mini Warehouse, Trip Transit, Signs, Valuable Papers)

Assured:	
P.O. Address:	
Loc. Address:	
Inception Date:	Exp. Date:
Amount of Deductible: \$	-
Prior Carrier:	Exp. Date:
Reason for Changing Companies:	
Loss Experience—Amount & Cause (Five Years):	
Where Theft is an insured peril on premises, indicate the b	urglary premium at the coinsurance limit in Burglary Manual:
\$	
Agricultural Equipm	ent (Schedule Required)
Unit storage facilities:	Radius of use:
Schedule of item(s) (including description; serial #; value):	
,	
Bailee's	s Customers
Description of goods:	
Description of goods:	

Signs		
Describe Location and support structure on premises:		
Print sign wording: ""		
Two sides? Limit of Liability per sign to be covered: \$		
All Risk   Named Peril		
Golf Carts		
Description of where and how carts are stored:		
Limit of Liability: \$		
Is operation of cart limited to the premises of named golf course only? ☐ Yes ☐ No If no, explain:		
All Risk  Named Peril		
Mini Warehouse		
Description of general merchandise stored:		
Limit of Liability: \$		
Maximum Limit any one item: \$		
Type of security for premises:		
Trip Transit		
Description of item(s) to be transported:		
Name; Date of Birth; Driving Record of operator:		
Value of item(s): \$		
Radius of operation: Number of days of trip:		
Description of Vehicle and/or trailer:		

Construction of building:  Type of safe or vault papers kept in:  Are duplicate copies kept on or off premises?  On  Off  Value of papers:  Type of fire or police protection system:  APPLICABLE IN THE STATE OF NEW YORK:  Any person who knowingly and with intent to defraud any insurance company or other person insurance or statement of claim containing any materially false information, or conceals for the information concerning any fact material thereto, commits a fraudulent insurance act, which is a subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for	son files an application fo
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	a crime, and shall also be
FRAUD WARNING:	
Any person who knowingly and with intent to defraud any insurance company or other person insurance or statement of claim containing any materially false information or conceals for the information concerning any fact material thereto commits a fraudulent insurance act, which is a person to criminal and civil penalties.	the purpose of misleading
PRODUCER'S SIGNATURE: DATE:	
APPLICANT'S SIGNATURE: DATE:	
	SE NO.:
(Applicable to Florida Agents Only.)	

IMPORTANT NOTICE .

As part of our underwriting procedure, a routine inquiry may be made to obtain applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.