4	ACOF	RD,	_M PI	RC	PER	RTY S	SEC	TION	1										D	ATE (MM/I	DD/YYYY)			
AGENCY PHONE (A/C, No, Ext): FAX (A/C, No):								(First Named	APPLICANT (First															
								EFFEC	CTIVE DAT	E DATE EXPIRATION		ON DATE	DIRECT I			PAYMENT		MENT PL	_AN		AUDIT			
									COMPANY															
									USE ONLY															
PREMISES #: STREET ADD																								
PREMISES INFORMATION BUILDING #: BLDG DES										INFLATI GUARD	ON		BL	KT										
SUBJECT OF INSURANCE					AMC	DUNT	COINS %	VALUAT	ION CAI	CAUSES OF LOSS			%	DEDUCT	IBLE C	COV FORMS			AND CONDITIONS TO APPLY					
	DITIONAL INFO					SS INCOME /							W/O EXTRA EXPENS				EXTRA I							
TYP	E OF BUSINES	ss _	ORDINARY		\neg	POWER/HE		EXT P			TUITION FEES			<u> </u>			EM POWER		DEPEND PROP					
	NON MFG	-	EXCL		INCL	\$	DEI		O PERIOD	DAYS	1		-			POWE			% COIN					
	MFG MINING			DAYS 0 DAYS	2	ELEC MED	DAY:		LIMIT S			SE	HER ED RV/INC		VATE									
	% CC	INS	\$	UDAI	,	ORD OR LA			AX PERIOI		1					DESC	CR BELOW)		MFG LOC					
		* .	s													SC BELOW)								
NAME AND ADDRESS(ES) FOR OFF PREM POWER OR DEPEND PROP											•				•		EXTR EXPE	A NSE _		DAYSF	ERIOD REST			
									LIMIT LOSS PA									%%%						
CON	ISTRUCTION T	YPE			DIS HYDRA	TANCE TO INT FIRE S	TAT MI	FIRE	DISTRICT	/CODE	ODE NUMBER			PROT CL # STORIES			# BASM'TS YR BUII			TOTAL A	REA			
BUILDING IMPROVEMENTS B					BLDG (GRA	CODE TAX CODE RO			OOF TYPE			OTHER O												
	WIRING, YR: PLUMBING, YR: ROOFING, YR: HEATING, YR:					WIND C	LASS					۲.	HEATING	DOIL ED O	N DD	EMICE CO			YES	NO				
	OTHER:	J, TK.						ESISTIVE	SI	EMI- ESIST	DVF	OTHER					LACED ELSE	WHERE	2	YES	NO NO			
						LEFT EXPO			<u> </u>	IVE I	OTTLER			XPOSURE			· · · · · · · · · · · · · · · · · · ·		1120	110				
BURGLAR ALARM TYPE CERTIFICATI							TE#	E#			EXPIRATION DATE			EXT	ENT			CENTRAL STATION WITH KEYS						
BURGLAR ALARM INSTALLED AND SERVICED BY															# GUA		DS/WATCHMEN		CLOCK HOURLY					
PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2/Chemical Systems)									% SPRNK FIRE ALARM MANUFACTURER									CENTRAL STATION LOCAL GONG						
ADDITIONAL INTERESTS							·									·	•							
RANK: NAME AND ADDR				DRESS	REFERENCE #				CERTIFI					TIFICATE	REQUIRE	D	INTEREST IN ITEM NU				ER			
INT	EREST														LOCATION: BUILDING:									
LOSS PAYEE MORT-														-		O ITEM N	ITEM NUMBER:							
MORT- GAGEE ITEM DESCRIPTION:								OTHER:								OTHER:								
V۸	LUE REPO				ΑΤΙΩΝ																			
						D DACT 12 A	MONTHS						ΔΝΝ	OTHER	OCA-		ANY OTHER	I OCA-	р	SEMISES	NOT OWNED			
REPORTING FORM: PROVIDE AVERAGE VALUES FOR PAST 12 MONTHS SUBJECT OF INSURANCE									_	PRI BU	EMISES/ JILDING			ANY OTHER LOCA- TION DECLARED AT INCEPTION			ANY OTHER LOCA- TION ACQUIRED AFTER INCEPTION			PREMISES NOT OWNED OR ACQUIRED LIMIT				

ADDITIONAL PREMISES INFORMATION SUBJECT OF INSURANCE				PREMISES #: STREET ADDRESS:																	
			PREMISES #: BUILDING #:		STREET AL																
			AMOUNT		COINS % VALUATIO		N CAUSES OF		LOSS INFLAT		DEDUCTIBLE		BLKT COV	T FORMS AND CONDITIONS TO A			APPL	Υ			
			-								GOARD 70	. ,									
ADD	ITIONAL INFO	RMATIC	ON	BUSII	IESS INCOME /	EXTRA EXPE	ENSE	1	BUSINESS INCO			OME W/O EXTRA EXPENSE			EXTRA EXPENSE						
TYP	E OF BUSINESS ORDINARY PAY			ROLL	POWER/HE	EAT	EXT P	PERIOD		TUI	TION FEES			OFF PRE	EM POWER	DEF	DEPEND PROP				
	NON MFG		EXCL	INCL	\$	DED		D	AYS \$		s	STUDENTS		POWE	% COIN						
	MFG		90 DAYS	;	ELEC MED	IA	MO PI	ERIOD \$			OTHER ED SERV/INC			WATE	CONT LOC						
	MINING 180 DAY			S		DAYS			IMIT		32			COMN (DESC	REC LOC						
% COINS				ORD OR LA			PERIOD							MFG LOC							
NAN	E AND ADDR	ESS(ES)	FOR OFF PRI	M POWER	OR DEPEND P	DAYS PROP									EXTRA EXPENS	LDR LOC (DESC BELOW) SE DAYS PERIOD REST					
															LIMIT LOSS PAY) ILLOI	
																		%%			
ADD	ITIONAL COV	ERAGES	S, OPTIONS, R	ESTRICTIO	NS, ENDORSE	MENTS AND I	RATING INFO	RMATIO	N												
CONSTRUCTION TYPE				I I	ISTANCE TO RANT FIRE S	ТАТ	FIRE DIS	STRICT/CODE NUMBER				PROT CL # STORIE		ORIES	# BASM'TS	YR BUILT	- -	TOTAL AR	EA		
				""	FT	МІ															
BUILDING IMPROVEMENTS						BLDG C GRAD	ODE TAX CODE ROOF TYPE					OTHER OCCUPANCIES									
WIRING, YR: PLUMBING, YR:																					
ROOFING, YR:					, YR:	WIND CL	WIND CLASS			HEATING BO			BOILER	R ON PR	EMISES?		YES NO			NO	
RIGI	OTHER: IT EXPOSURE	- & DIST	ANCE				RESISTIVE SEMI- RESIST FT EXPOSURE & DISTANCE			OTHER IF YES, IS INS					LACED ELSEW	HERE?		YES		NO	
	II EXI GOOKE	- u Dio:	AITOL			EET I EXT O	JOINE & DIO!	ANOL				I KEAR E	.x. 000	J. L. G. D.	IOTAITOL						
BUR	GLAR ALARM	1 TYPE				CERTIFICAT	EXPIRATION			ON DATE E			EXTENT GRADE		Пс	CENTRAL STATION					
																WITH KEYS					
BUR	GLAR ALARM	INSTAI	LLED AND SEF	VICED BY									# (GUARDS	S/WATCHMEN	CLOCK HOURLY					
	MIOEO FIRE R	DOTEO	FION (O	011		· 0				FIRE ALARM MANUFACTURER											
PREMISES FIRE PROTECTION (Sprinklers, Standpipes,					pes, CO2/Cnem	licai Systems	,	% SPRN	RNK FIRE ALARM MANU			ACTURER				CENTRAL STATION					
	DITIONAL	INTE	RESTS											LOCAL GONG							
RAN			AND ADDRES	 S:	R	EFERENCE #	<u> </u>				CE	RTIFICATE	REQUI	RED	INTE	EREST IN	ITE	M NUMBE	R		
INTE	INTEREST														LOCATION: BUILDING:						
	LOSS PAYEE														SCHEDULED ITEM NUMBER:						
	MORT- GAGEE													OTHER:							
		ITEM DESCRIPTION:																			
RE	MARKS																				

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, NE, OH, OK, OR or VT; in DC, LA, ME, TN and VA, insurance benefits may also be denied)