

GENERAL APPLICANT INFORMATION

Applicant's Name			
Mailing Address	City	State	Zip
Location Address	City	State	Zip
Same as Mailing			
DESIRED COVERAGE			
Property General Liability			
DESIRED TERM			
\Box Annual \Box 9 months \Box 6 months \Box 3 m	nonths		
TYPE OF VACANT EXPOSURE			
\square Applicant is the owner of a building that is 100% vacant	Total sq. ft	_	
\square Applicant is the owner of a condo unit that is 100% vacant	Total sq. ft	_	
Applicant is the owner of a building that is partially vacant Description & sq. ft. of all tenant occupancies	Total sq. ft		
\square Applicant is the tenant leasing space that is currently vacant	Total sq. ft	_	
GENERAL UNDERWRITING INFORMATION & ELIGIBILITY			
1. Any past, pending or planned bankruptcy or judgment for u	innaid taxes against the nam	ed insured	

	or any officer, partner, member or owner of the applicant individually within the last five years?				о⊔	
2.	. Has coverage been cancelled or non-renewed in the past three years for any reason other than the					
	build	ding l	peing vacant (not applicable in Missouri)?	Yes 🗌 N	o 🗆	
3.	Is the building locked and secured from unauthorized entry?					
4.	Is the building currently damaged (fire or otherwise)?					
5.	Is an	ny de	molition work scheduled or planned in the future?	Yes 🗌 N	o 🗆	
6.	Will	there	e be any renovation work performed during the policy period?	Yes 🗌 N	o 🗆	
	•	s coverage been cancelled or non-renewed in the past three years for any reason other than the ilding being vacant (not applicable in Missouri)? Yes \Box No \Box the building locked and secured from unauthorized entry? Yes \Box No \Box				
	•	lf ye	s, please answer the following questions:			
		0	Will the renovations involve structural work?	Yes 🗌 No	\Box	
		0	Are certificates of insurance required from all subcontractors or is the applicant performing the renovation work?	Yes 🗌 No)	
		0	Does the insured or contractor performing the work have at least 3 yrs of experience in conducting renovation projects?	Yes 🗌 No	, 🗆	
		0	Will the renovations include any building additions other than situations where all buildings are frame construction			
			and/or additions are being added to any side of the building?	Yes 🗌 No)	
		0	Does the project involve bridges, dams, tunnels, bubble buildings, green houses, waste water facilities, airport hangars			
			silos, chemical petroleum energy, co-generation tanks, or radio, TV and communication towers?	Yes 🗌 No	\Box	

 \circ Are any exterior operations limited to a maximum of four stories in height or fifty feet from grade level? Yes \Box No \Box

PROPERTY UNDERWRITING INFORMATION & ELIGIBILITY

Building I	limit						
Business	Personal Property limit	t	_				
Desired Property deductible: Desired Coinsurance:							
□ \$500 □ \$2,500 □ \$10,000 □ 80% □ 90% □ 100%				□ 100%			
□ \$1,00	0 \$5,000	□ \$25,000					
7.	7. Have there been any Property losses in the past three years?						
	Date of Loss	Descriptio	on of Loss	Open/Closed?	Amount Paid	Reserve	
8.	Diagon calent the core	truction tune of the hu	Iding				
0.	Frame	truction type of the bu	isted Masonry	□ Non-Combustible			
	□ Masonry Non		odified Fire Resistive	Fire Resistive			
0	•	otection class of the bu					
9. 10							
		ar of original constructi	011			Yes 🗌 No	
	Is the building plumbi		act 25 years?			Yes \Box No Yes \Box No	
		s been updated in the p					
		be of roof and year of n	-				
14.		vner of all properties o	r the tenant required to	insure the building		Yes 🗌 No	
45	(if building coverage is						
	Is the location a mobil					Yes 🗌 No	
16.		evicted from the prope	ty in the past 60 days a	ind/or is any tenant in	the process		
	of being evicted?					Yes 🗌 No	
17.	Is there a loss payee t	hat needs to be added				Yes 🗌 No	
	Name	Interest	Interest Address				
GENERA	AL LIABILITY UNDERV	VRITING INFORMATI	ON & ELIGIBILITY				
Please se	elect the desired Genera	al Liability limit:					
	000/\$200,000	, □ \$300,000/\$	500,000	□ \$1,000,000/\$1,0	00,000		
□ \$100,000/\$200,000 □ \$500,000/\$500,				□ \$1,000,000/\$2,0			
□ \$100,000/\$300,000 □ \$500,000/\$30				□ \$1,000,000/\$3,0			
		General Liability losses			,	Yes 🗌 No	
	Date of Loss		tion of Loss	Open/Closed?	Amount Paid	Reserve	
19.	19. Is the building located on a piece of land greater than five acres?						
20.	20. Is the building located on a farm?						
21.	21. Is there a swimming pool at the location?					Yes 🗌 No	
22. Is there a mortgagee that needs to be added as an additional insured?					Yes 🗌 No		
Name Interest Address							

Applicant's Signature:_____ Date:_____