| PRODUCER: | | PHONE: | | FAX: | | | |
|--|---|--|--|-----------------------------|--|--|--|
| APPLICANT NAME: | | | | | | | |
| | ONTACT: PHONE: | | | | | | |
| IAILING ADDRESS: | | | | | | | |
| DESCRIBE RISK: | | | | | | | |
| ENTITY IS: O INDIV | IDUAL O PARTNEF | RSHIP O JOINT V | VENTURE COR | RPORATION OTH | HER: | | |
| PRIOR CARRIER(S) AN | | | | | | | |
| LOSS HISTORY: HAVE *(IF YES PLEASE ATTACH | THERE BEEN AN 5 YEARS LOSS HISTO | Y CLAIMS IN PA ORY & DETAIL IN (| AST 5 YEARS? COMMENTS BELOW | /)* | O): | | |
| LIABILITY/COVERA | | | | | | | |
| PROPERTY / OTHER | R COVERAGE: | (FOR ADD | ITIONAL BUILI | DINGS, PLEASE | ATTACH SCHEDULE) | | |
| LOCATION #: | BUILDING #: | ADDRE | ESS: | | | | |
| INTEREST OF APPLIC | | | | | | | |
| ITEM | AMOUNT | COING | X7 A T TIES | DEDUCTIBLE | FORMS / CONDITIONS | | |
| I I DIVI | AMOUNI | COINS | VALUE | DEDUCTIBLE | 1 Old (IS) CONDITION | | |
| II EIVI | AMOUNT | COINS | VALUE | DEDUCTIBLE | TOTAL TOTAL TOTAL | | |
| HEN | AMOUNI | COINS | VALUE | DEBUCTIBLE | | | |
| HEN | AMOUNI | COINS | VALUE | DEBUCTIBLE | | | |
| | | | | | | | |
| PREMISES INFORM | ATION (MUST BE | E COMPLETED I | FOR <u>EACH</u> LOCA | TTION): | PROTECTION CLASS: | | |
| PREMISES INFORM CONSTRUCTION TYPE | ATION (MUST BE | E COMPLETED I | FOR <u>EACH</u> LOCA | (<i>TION</i>): | | | |
| PREMISES INFORM CONSTRUCTION TYPE BUILDING TOTAL AF | ATION (MUST BE PE: UN | E COMPLETED I STORIES ITS: FIRE | FOR <u>EACH</u> LOCA :: BASEM E PROTECTION: | (<i>TION</i>): | PROTECTION CLASS: | | |
| PREMISES INFORM CONSTRUCTION TYPE BUILDING TOTAL AF LIST OCCUPANTS: | ATION (MUST BE PE: UN | E COMPLETED I STORIES ITS: FIRE | FOR <u>EACH</u> LOCA :: BASEM E PROTECTION: | I <i>TION</i>): IENTS:F | PROTECTION CLASS: | | |
| PREMISES INFORM CONSTRUCTION TYPE BUILDING TOTAL APPLIST OCCUPANTS: IS A CENTRAL STAT | ATION (MUST BE PE: UN REA: UN | E COMPLETED ITS: FIRE | FOR EACH LOCA : BASEM E PROTECTION: YES NO | ITION): IENTS: F | PROTECTION CLASS: YEAR BUILT: | | |
| PREMISES INFORM CONSTRUCTION TYPO BUILDING TOTAL APPLIST OCCUPANTS: IS A CENTRAL STATE BUILDING UPGRAD | ATION (MUST BE PE: UN REA: UN ION ALARM IN O DES: WIRE: □ | E COMPLETED IT STORIES ITS: FIRI OPERATION?: ROOF: □ | FOR EACH LOCA E PROTECTION: YES NO PLUMBING | ITION): IENTS: F | PROTECTION CLASS: YEAR BUILT: | | |
| PREMISES INFORM CONSTRUCTION TYF BUILDING TOTAL AF LIST OCCUPANTS: IS A CENTRAL STAT BUILDING UPGRAD NEXT LOCATION #: INTEREST OF APPLIC | ATION (MUST BE PE: UN ION ALARM IN O PES: WIRE: BUILDING ANT: BUILD | E COMPLETED ITS: FIRE OPERATION?: ROOF: □ G #: A DING OWNER O | FOR EACH LOCA E PROTECTION: YES NO PLUMBING ADDRESS: CCUPANT | NAME COMPA | PROTECTION CLASS: YEAR BUILT: ANY: OTHER: NER-LESSOR | | |
| PREMISES INFORM CONSTRUCTION TYPE BUILDING TOTAL APP LIST OCCUPANTS: IS A CENTRAL STATE BUILDING UPGRAD NEXT LOCATION #: | ATION (MUST BE PE: UN ION ALARM IN O PES: WIRE: BUILDING | E COMPLETED A STORIES ITS: FIRE PERATION?: ROOF: G#: | FOR EACH LOCA : BASEM E PROTECTION: YES NO PLUMBING ADDRESS: | NAME COMPA | PROTECTION CLASS: YEAR BUILT: ANY: OTHER: NER-LESSOR | | |
| PREMISES INFORM CONSTRUCTION TYF BUILDING TOTAL AF LIST OCCUPANTS: IS A CENTRAL STAT BUILDING UPGRAD NEXT LOCATION #: INTEREST OF APPLIC | ATION (MUST BE PE: UN ION ALARM IN O PES: WIRE: BUILDING ANT: BUILD | E COMPLETED ITS: FIRE OPERATION?: ROOF: □ G #: A DING OWNER O | FOR EACH LOCA E PROTECTION: YES NO PLUMBING ADDRESS: CCUPANT | NAME COMPA | PROTECTION CLASS: YEAR BUILT: ANY: OTHER: NER-LESSOR | | |
| PREMISES INFORM CONSTRUCTION TYPE BUILDING TOTAL APPLICE IS A CENTRAL STATE BUILDING UPGRADE NEXT LOCATION #: INTEREST OF APPLICE | ATION (MUST BE PE: UN ION ALARM IN O PES: WIRE: BUILDING ANT: BUILD | E COMPLETED ITS: FIRE OPERATION?: ROOF: □ G #: A DING OWNER O | FOR EACH LOCA E PROTECTION: YES NO PLUMBING ADDRESS: CCUPANT | NAME COMPA | PROTECTION CLASS: YEAR BUILT: ANY: OTHER: NER-LESSOR | | |

| PREMISES INFORMATION (MUST BE COMPLETED FOR <u>EACH</u> LOCATION): | | | | | | | | | |
|--|--|--------|---------------|--|-------------------|--|--|--|--|
| CONSTRUCTION TYPE: | | STORIE | S: BASEMENTS: | | PROTECTION CLASS: | | | | |

BUILDING TOTAL AREA: UNITS: FIRE PROTECTION: YEAR BUILT: ____ LIST OCCUPANTS: IS A CENTRAL STATION ALARM IN OPERATION?:

YES NO NAME COMPANY: **BUILDING UPGRADES:** WIRE: \square ROOF: \square PLUMBING: \square HEAT: \square OTHER: \square

ARE COMMERCIAL TENANTS REQUIRED TO NAME APPLICANT AS ADDITIONAL INSURED: YES NO ANY POOLS OR ADDITIONAL HAZARDS? (DESCRIBE BELOW): ☐ YES ☐ NO

COMMENTS: _ APPLICANT / PRODUCER SIGNATURE: DATE:

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