VACANT PROPERTY PROGRAM APPLICATION

APPLICANT INFORMATION	
Name	Telephone
Mailing Address	
Contact Name	Policy Term
Location of Vacant Property	
- <u></u>	
Property Limit Requested: Building \$ (80%	Coins) Deductible \$
Purchase Price \$ Cost	
Valuation: ACV Replacement CostOther_	
Perils Requested: Fire E.C Vandalism	n Other
Gen'l Liability Limits: Occurrence \$Gen'l Aggrega	ate \$Medical Payments <u>\$</u>
Date purchased or acquired Building has been vacant since	
Prior Occupancy	
Year Built Year Renovated	Year Systems Upgraded
No. of Stories Type of Construction	Year Roof Replaced
Intended Disposition of Property (i.e., sell, rent, occupy, renovate)	
Describe neighborhood - i.e., rural, commercial, residential	
Describe general condition of building	
Describe unrepaired damage, if any	
How often are regular checks made to premises?	Photos attached?
Is building clear/secured/alarmed?	Utilities operational?
Insured's Loss History (all locations)	
Bankruptcy Status Previous Carrie	r
Mortgagee	
Other information/comments	
L	

Applicant Signature & Date

NOTICE OF INSURANCE INFORMATION PRACTICES

PERSONAL INFORMATION ABOUT YOU, INCLUDING INFORMATION FROM A CREDIT REPORT, MAY BE COLLECTED FROM PERSONS OTHER THAN YOU. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES. YOU HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND CAN REQUEST CORRECTION OF ANY INACCURACIES. A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING SUCH INFORMATION IS AVAILABLE UPON REQUEST. CONTACT YOUR AGENT OR BROKER FOR INSTRUCTION ON HOW TO SUBMIT A REQUEST TO US.