

## **BONDING & INSURANCE SPECIALISTS AGENCY, INC.**

13841 Southwest Hwy · Orland Park IL 60462 · 800-346-1031 · Fax: 708-598-6686

## INLAND MARINE - PROPERTY AND BAILEE APPLICATION

DATE OF APPLICATION DESIRED EFFECTIVE DATE
PART I: BUSINESS PERSONAL PROPERTY COVERAGE  1. Full company name (include dba)
2. Phone Email  3. Do you own the building from which you operate?  4. Street Address, City, County, and Zip
5. Approximately how old is the building? 6. Primary construction (Brick, Steel, Wood, Cement or Other) 7. Does it have a central alarm for security and fire? 8. Is it sprinkled?
9. Is there a fenced yard where equipment is stored?  10. What is the square footage that you occupy in the building? ft2.  11. If you own the building what is the building's total square footage? ft2.  12. What is the total estimated replacement cost of your business personal property? Include all items such as furniture, copy machines, computers, phones systems, faxes etc. (basically office equipment) \$
PART II: CONTRACTOR'S EQUIPMENT COVERAGE  1. What is the estimated replacement cost total of the contractors equipment that you can itemize and list on an inventory sheet? (For example: air movers, dehumidifiers, generators and specialty tools) \$
<ol><li>Attach your inventory sheet(s) with item descriptions, model and/or serial numbers and replacement cost of each item.</li></ol>
An inventory list with individual items values is required to bind coverage.
PART III: BAILEE COVERAGE - Coverage of property entrusted to the insured for storage, repair, or servicing.
Are you required to carry a specified amount of coverage by a third party?  If Yes, what limit is required? \$
What is your actual Bailee exposure? \$  (The maximum amount of items at any given time in your custody or control)
3. Where will you store property in your custody?  (Add additional locations by attachment)  4. What would be the most transported at one time? \$
Confirm Your Requested Coverage Limit \$

<ol> <li>What is the maximum value of equipment you will rent at any one time?</li> </ol>	
We offer up to a \$50,000 limit of blanket coverage item limit. Any requests for coverages outside of with a description and approximate value of item	these ranges must be submitted in writing
PART V: CLAIMS	S HISTORY
Have you had any property claims in the	past 5 years
If Yes, Explain	
2. Attach loss history from previous insurer Loss history will be required to bind coverage. C known loss statement from the applicant as long reasonable amount of time after binding. Otherw	overage may be bound with a signed no as loss runs are provided within a
This application shall not be binding up Company or its duly appointed represer policy shall be issued and a payment shall commencement date of said policy at thereof. The said applicant hereby foregoing statements and answers are facts and circumstances with regard to the are hereby made the basis and conditions the part of the Insured.  X  Applicant's Signature	nless and until confirmation by the ntatives has been given, and that a all be made, and then only as of the nd in accordance with all terms covenants and agrees that the a full and true statement of all the he risk to be insured, and the same
Applicant's Signature	Date
Print Name and Title	
FRAUD STAT	<u>EMENT</u>
ANY PERSON WHO KNOWINGLY PRESENTS PAYMENT OF A LOSS OR BENEFIT OR KNOWIN AN APPLICATION FOR INSURANCE IS GUILTY	——— A FALSE OR FRAUDULENT C IGLY PRESENTS FALSE INFORI

PART IV: RENTAL EQUIPMENT COVERAGE - Optional

FINES AND CONFINEMENT IN PRISON