

Gladius Insurance Services Quick BOP Quote

This is a Fillable Application

Producer Information

Agency Name	
Agency Contact/Producer	
Agency Address	
Agency Telephone	
Agency/Producer Email	

Proposed Effective Date	
Proposed Expiration Date	

Applicant Information

Name	
DBA	
Mailing Address	
City, State & Zip	
Phone	
FEIN	
Physical Address (If Mailing is a PO Box)	
Years as Current	
Years of Experience	
Number of Employees	
Any Losses in the past 5 years?	
Entity of Company	

Complete Description of Operations

General Liability Limits

Aggregate	
Occurrence	
Completed Operations	
Fire Legal	
Med Pay	

Building

Building Location	
Construction Type	
Year Built	
Year Roof Updated	
# of Stories	
Square Feet	
Owner or Tennant?	
Sales/Payroll at this location	

Yes or No

Central Station Fire Alarm	
Sprinkler(SP)	
Security Service	
Service Contract (Security Contract)	
Central Station Burglar Alarm (P9)	
Automatic Commercial Cooking Exhaust and Extinguishing System	
Winstorm Hail Roof Damage Actual Cash Value (WHRoof)	
Windstorm Protective Devices (if yes, what type)	

Building Rating Basis (BLDG, Standard) Replacement Cost or Actual Cost Value?	
Business Personal Property Rating Basis (BPP, Standard) Replacement Cost or Actual Cost Value?	
Insured Occupancy Percentage	
What percent of the building is vacant?	
Building Limit (BLDG, Standard)	
Building Valuation	
Business Personal Property Limit	