

GENERAL APPLICANT INFORMATION

Applicant's Name _____
 Mailing Address _____ City _____ State _____ Zip _____
 Location Address* _____ City _____ State _____ Zip _____
 Total Acreage _____
 Same as Mailing

*Please note that contiguous parcels of land should be considered one location

DESIRED TERM

Annual 9 months 6 months 3 months

DESIRED GENERAL LIABILITY LIMITS

\$100,000/\$200,000 \$500,000/\$500,000
 \$100,000/\$300,000 \$500,000/\$1,000,000
 \$300,000/\$300,000 \$1,000,000/\$1,000,000
 \$300,000/\$600,000 \$1,000,000/\$2,000,000

GENERAL UNDERWRITING INFORMATION & ELIGIBILITY

1. Have there been any General Liability losses in the past three years? Yes No

Date of Loss	Description of Loss	Open/Closed?	Amount Paid	Reserve

2. Any past, pending or planned bankruptcy or judgment for unpaid taxes against the named insured or any officer, partner, member or owner of the applicant individually within the last five years? Yes No
3. Has coverage been cancelled or non-renewed in the past three years for any reason other than the building being vacant (not applicable in Missouri)? Yes No
4. Are there any construction activities scheduled to occur during our policy term? Yes No
5. Will activities of any kind (business, recreational or other) take place on the property, with or without the owner's permission? Yes No
6. Are there any structures on the premises? Yes No
7. Any exposure to landfills, quarries, underground mines, strip mines, caves, wells or dams? Yes No
8. Are there any leased operations on the vacant land? Yes No
9. Is there any land owned by or part of the common area of a residential or business association? Yes No
10. Is there any exposure to a lake or a pond? If yes, confirm the acreage of the lake/pond _____ Yes No
11. Is there a mortgagee that needs to be added? Yes No

Name	Interest	Address

Applicant's Signature: _____ Date: _____