***COMMERCIAL MULTIPLE PERIL APPLICATION***

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| Applicant’s Name (Legal and Operating):       | Broker:       |
| Risk Location:       | Broker Code:      |
| Principal’s Name:      Contact Number:       | Branch:      |
|  | Policy Period:       to       (12:01 AM) |
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| **Applicant Data- Occupancy** |
| Description of Operations (Attach financials, company/ product brochures and other related information)  |
|  |
| Business Start Date:       | Business Experience: # of Years:       |
|  |
| **Loss and Policy History** |
| Previous *claims* in the past 5 years? [ ]  Yes, [ ]  No Describe:      |
| **Previous Insurer:**  | **Policy #:**  |
| Has any insurer *cancelled, declined or* *refused* to renew Commercial Insurance in the past 5 years? [ ]  Yes, [ ]  No |
| **Supporting Business:** Policy #: | Company:       |

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| **Construction Details** |
| Wall Construction | **[ ]** Reinforced Concrete[ ]  Brick Veneer | **[ ]** Hollow Concrete Block[ ]  Metal Clad- Steel Frame | **[ ]** Solid Brick Masonry[ ]  Wood Frame |
| Roof Construction | **[ ]** Concrete Joist[ ]  Heavy Timbers[ ]  Wood Joist | **[ ]** Steel Deck [ ]  Open Steel System, Corrugated Metal, Steel Trusses[ ]  Open Wood, Corrugated Metal |
| Year Built:       If building over 25 years, have updates been carried out [ ]  Yes, [ ]  No |
| **Renovation Dates**:  | Roof:       | Heating:       | Electrical:       | Plumbing:       |
| Hydrant Protected?       | Distance to Fire hall:       kms       miles |
| Smoke Detectors: [ ]  Yes, [ ]  No  | Alarm System:  | Fire: [ ]  | Burglary: [ ]  | Monitored 24 Hr: [ ]  |
| Sprinklers: [ ]  Yes, [ ]  No | CO2 System:[ ]  Yes, [ ]  No *If yes*: [ ]  Wet Chemical, [ ]  Dry Chemical |
| Total Area of Business (Including Basement):       sq. m       sq. ft |
| Area Occupied by Insured:       sq. m       sq. ft |
| # of Stories (excluding basement)       | Basement: [ ]  Yes, [ ]  No |
| **Type of Heating**: Primary:       | Secondary:       |
| **Type of Electrical System: [ ]** Breakers  | [ ]  Fuses |

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| **Coverages** |
|  | **Coverages** | **All Risk** | **NP** | **Ded.** | **Coins %** | **Amount of Insurance** | **Rate** | **Premium** |
| **Property** |  |  |  |  |  |  |  |
|  | Building | **[ ]**  | **[ ]**  |  |  |  |  |  |
| Equipment | **[ ]**  | **[ ]**  |  |  |  |  |  |
| Stock | **[ ]**  | **[ ]**  |  |  |  |  |  |
| Contents | **[ ]**  | **[ ]**  |  |  |  |  |  |
| Office Floater | **[ ]**  | **[ ]**  |  |  |  |  |  |
| Builder’s Risk | **[ ]**  | **[ ]**  |  |  |  |  |  |
| Contractors Equip | **[ ]**  | **[ ]**  |  |  |  |  |  |
| Computer Rider | **[ ]**  | **[ ]**  |  |  |  |  |  |
| Cargo | **[ ]**  | **[ ]**  |  |  |  |  |  |
| Other | **[ ]**  | **[ ]**  |  |  |  |  |  |
| **Extensions of Coverage** |
|  | Inflation Protection | **[ ]**  | Flood | **[ ]**  |
| Peak Season | **[ ]**  | Sewer Backup | **[ ]**  |
| Earthquake | **[ ]**  | Replacement Cost | **[ ]**  |
| **Business Interruption** |
|  | Actual Losses | **[ ]**  |
| Gross Earnings | **[ ]**  |
| Profits | **[ ]**  |
| **Boiler and Machinery** |
|  | Equipment Breakdown | **[ ]**  | Option 2 | **[ ]**  |
| Option 1 | **[ ]**  | Option 3 | **[ ]**  |
| **Crime** |
|  | Broad Form Money and Securities | **[ ]**  |
| Inside and Outside Paymaster Robbery | **[ ]**  |
| Money Orders and Counterfeit Currency | **[ ]**  |
| Depositors Forgery | **[ ]**  |
| Employee Dishonesty | Form A: [ ]  | Form B: [ ]  |
| **Liability** |
| Liability (occurrence) Limit: $       | Prop/ Ops Aggregate: $      |
| BI & PD Deductible: $      | Medical Payment: $      |
| Tenants Legal Liability: $       | Premises only: [ ]  Yes, [ ]  No |
| Personal Injury: $       | Prod/ Comp Ops: [ ]  Yes, [ ]  No |
| Non Owned Automobile: $       | Annual Revenue: $       |
| Other: $       |  |
| **M.R.P**: $       | **Total Premium**: $       |

**Signed by:** **Date:**

***NOTE: Please attach a photo or EMAIL a photo of the RISK***