



PROPERTY | GL REQUEST

SECTION I

- Quote
- Add GL Only
- Add Property
- New Organization
- Delete GL Only
- Delete Property

Effective Date: _____

SECTION II — Named Insured

NAMED INSURED/CONFERENCE:	
ORGANIZATION:	CHANGE NAME:

ADDRESS:

STREET:	
CITY:	
STATE:	ZIP:
COUNTY:	
ORG CODE (CERT #):	
PROPERTY #:	
LOCATION/BUILDING #:	

CHANGE ADDRESS:

STREET:	
CITY:	
STATE:	ZIP:
COUNTY:	

SECTION III — Add Property/New Business

SQUARE FEET:
USE OF PROPERTY:
CONSTRUCTION:
YEAR BUILT:

# OF STORIES:		
SPRINKLER:	YES	NO
BUILDER'S RISK:	YES	NO

BUILDING VALUE: \$ **CONTENTS VALUE: \$**

Replacement Cost Agreed Max Actual Cash Value 30% 20% Fixed

SECTION IV — Mortgagee Loss Payee Delete

NAME:		
ATTN:		
LOAN/LEASE #		
STREET:		
CITY:	STATE:	ZIP:

SECTION V — NOTES

AE/CSR

NAME OF AE/CSR	DATE
REQUESTED BY	DATE