



Inland Marine

1) Is coverage being requested for Mobile/Miscellaneous Equipment? Yes No

If yes, please answer the following questions:

a. What is the total value of all items valued \$1,000 or less? \$ _____

b. List all Mobile/Miscellaneous Equipment valued over \$250: _____

c. Description Make/Model Serial Number Value _____

Business Auto

1) Does any vehicle used in the business have a Gross Vehicle Weight (GVW) of over 26,000 lbs? Yes No

The information I have provided is true and accurate to the best of my knowledge. I have not willfully concealed or misrepresented any material fact(s) or information. I understand completion of this questionnaire does not compel the company to provide coverage.

Applicant's Signature	Date
Agent's Signature	Date