

Personal Inland Marine Supplemental Application (for attachment to a Homeowner's Application)

Applicant _____

1. Does applicant travel extensively? Yes No

If so, # of weeks per year? _____

Where if outside of the United States? _____

Coverages:

#	Property	Amount of Ins.	Rate	Premium	#	Property	Amount of Ins.	Rate	Premium
1.	Jewelry				8.	Stamps			
2.	Jewelry In Vault				9.	Coins			
3.	Furs				10.	Golfer's Equipment			
4.	Fine Arts				11.				
5.	Cameras				12.				
6.	Silverware				13.				
7.	Musical Instruments				14.				
Additional Rating Information:								Total	\$

General Information:

#	Explain all "Yes" Responses in Remarks	Yes	No	#	Explain all "Yes" Responses in Remarks	Yes	No
1.	Safes? Type and location?	<input type="checkbox"/>	<input type="checkbox"/>	3.	Is any property used professionally/commercially?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Will any Property be exhibited?	<input type="checkbox"/>	<input type="checkbox"/>	4.	Do you know the applicant personally? If so, how long?	<input type="checkbox"/>	<input type="checkbox"/>
				5.	Are any items held for sale?	<input type="checkbox"/>	<input type="checkbox"/>
Remarks:							

Prior Carrier for scheduled items: _____

