

Earthquake Coverage Request Form

Please read carefully and complete all sections

I. APPLICANT

Account Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Insured Email Address: _____

II. BUILDING INFORMATION (if different from above)

Same as above

Location # & Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Construction Class (please check one):

Wood Frame

Non-Combustible

Brick Veneer

Masonry Non-Combustible

Joisted Masonry – Tilt-Up

Modified Fire Resistive

Joisted Masonry – Reinforced Masonry

Fire Resistive

Joisted Masonry – Unreinforced Masonry

Modular

Year Built: _____

Number of Stories: _____

Square Footage: _____

Parking Class (please check one):

None

Tuckunder-2-Sides

Detached

Full Subterranean

Attached – No structure above

Partial Subterranean

Habitational Over Garage (HOG)

First Floor Parking

Tuckunder-1-Side

Soft First Floor

Occupancy (please check one):

Agri-Business

School

Service

Restaurant

Hotel/Motel

Warehouse

Apartment

Manufacturing

Wholesale

Retail

Office

Condo Association

Public Building

Explain Occupancy Class in Detail (*required*): _____

Building Shape:

Regular

Irregular

Unknown

Setbacks or Overhangs:

Yes

No

Unknown

Insured's Interest:

Lessor

Tenant

Owner Occupant

III. REQUESTED COVERAGE

Building: \$ _____ (100% Replacement Cost Required)
BPP: \$ _____ (100% Replacement Cost Required)
Tenant Improvements and Betterments \$ _____

Inspected Contact: _____
Inspection Telephone: _____

Requested Effective Date: _____
Deductible Option: 2% 5% 7.5% 10% 15% 20%

Mold Clean-Up and Removal Coverage:
\$10,000 (Building Only): _____

Earthquake Sprinkler Leakage: Yes No
Ordinance or Law: None 10% Sublimit 20% Sublimit
Flood Coverage: Yes No

Business Income/Extra Expense (provided on a *per location* basis):
BI/EE \$ _____ (for location)

Additional Property Coverage (provided on a *per location* basis):
APC \$ _____ (for location)

Please select which APCs are applicable for this location:
 Pools Fences Paved Surfaces

Applicant Signature: _____

Date: _____