

# Strickland General Agency, Inc.

## VACANT / RENOVATION PROPERTY APPLICATION (Personal and Commercial Property)

Coverage: Basic ISO Form (Fire, Lightning and Extended Coverage)  
Actual Cash Value, 80% Coinsurance, Vandalism \$1,000 Deductible

Agency: \_\_\_\_\_ Broker #: \_\_\_\_\_ Contact: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Desired Policy Term: \_\_\_\_\_ (3,6,12 months) Effective Date: \_\_\_\_\_

Vacant: Current Value \$: \_\_\_\_\_ Square Footage: \_\_\_\_\_

Renovation: Purchase Price \$: \_\_\_\_\_ Value of Improvements\$: \_\_\_\_\_ New Value\$: \_\_\_\_\_

Deductible **\$1000** Year Built: \_\_\_\_\_ Protection Class: \_\_\_\_\_ Construction Type: \_\_\_\_\_

Value: \_\_\_\_\_ Perils: Basic with VM&M Number of stories: \_\_\_\_\_ Coinsurance: \_\_\_\_\_

Age of Roof: \_\_\_\_\_ (If roof is over 20 years old water damage is excluded)

Updates: Wiring \_\_\_\_\_ Plumbing \_\_\_\_\_ Heating \_\_\_\_\_

Physical location address: \_\_\_\_\_

How long has the applicant owned the property at this location? \_\_\_\_\_

How long has building been vacant? \_\_\_\_\_

Reason for vacancy (provide details): \_\_\_\_\_

Intended disposition of property (i.e. , sell, rent, occupy): \_\_\_\_\_

Prior Occupancy: \_\_\_\_\_

Describe general condition of property: \_\_\_\_\_

How often are regular checks made to the property and by whom? \_\_\_\_\_

Is the building secured? \_\_\_\_\_ Bankruptcy Status? \_\_\_\_\_

Mortgagee: \_\_\_\_\_

Previous Carrier: \_\_\_\_\_

Other Pertinent Information: \_\_\_\_\_

### SUBMIT RISK

Cannot be bound until confirmation to you by fax or email / Risk vacant over 18 months / Renovations

### PROHIBITED RISKS

Building to be raised	Property with wood shake roof	Risk with 2 or more losses in past 3 yrs
Damaged Buildings	Any previous loss over \$20,000	
Risk in bankruptcy	Known or suspected arson	

Premium: ( \_\_\_\_\_ ) + ( FEE = \$ \_\_\_\_\_ ) + ( \_\_\_\_\_ TAX ) = TOTAL PREMIUM: \$ \_\_\_\_\_

(S/L TAX - AR, GA, MS - 4% \* LA, FL - 5% \* TN - 2.5% \* ON PREMIUM AND FEE)

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_