INSTY QUOTE APPLICATION  
Business Owner Policy

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **INSURED INFORMATION** | | | |  | | **AGENCY INFORMATION** | | | | |
| Name | |  | |  | | Name |  | | | |
| Address | |  | |  | | Address |  | | | |
| Phone | |  | |  | | Phone |  | | | |
| FEIN | |  | |  | | Contact |  | | | |
| Eff Date: | |  | |  | |  |  | | | |
|  | | | | | | | | | | |
| **Description of operations:** | | | | | | | | | | |
|  | | | | | | | | | | |
| If there are Multiple Named Insureds, are the entities combinable? | | | | | | | | | | |
| Has the insured ever been convicted of a felony? Yes No Has the insured ever declared bankruptcy? Yes No | | | | | | | | | | |
|  | | | | | | | | | | |
| **GENERAL LIABILITY LIMITS** | | | | | | | | | | |
| General Aggregate | | | $2,000,000 | | Expiring Carrier | | | |  | |
| Products & Completed Ops Agg. | | | $2,000,000 | | Expiring Premium | | | | $ | |
| Personal & Advertising Injury | | | $1,000,000 | | Year Business Est. | | | |  | |
| Each Occurrence | | | $1,000,000 | | Annual Sales | | | | $ | |
| Damage to Rented Premises | | | $50,000 | | No. of Employees | | | |  | |
| Medical Expense | | | $5,000 | | Employee Benefits | | | | (additional premium) | |
|  | | |  | |  | | | |  | |
| Hazard | Classification | | | | Class Code | | | Premium Basis | | Exposure |
| 1 |  | | | |  | | |  | |  |
| 2 |  | | | |  | | |  | |  |
| 3 |  | | | |  | | |  | |  |
|  | | | | | | | | | | |
| **PROPERTY limits:** | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Location** | | **TIV** | | **Construction**  **Type & Year** | **Year of Updates & Type:**  Specify Roof, Plumbing, Wiring, Heating, etc.  *(Required for bldg. 20+ years)* | **Number of Stories?** | **Working Sprinkler?** | **Monitored Central Station Burglar Alarm?** | **Monitored Central Station Fire Alarm?** | **Distance to Fire Hydrant?** |
|  | | Building:    Contents: | |  |  |  |  |  |  |  |
|  | | Building:    Contents: | |  |  |  |  |  |  |  |
|  | | Building:    Contents: | |  |  |  |  |  |  |  |
| Deductible | | | | | | | | | | |
| Is building more than 10% vacant? Yes No *If yes, risk is not a fit for BOP program.* | | | | | | | | | | |
| Any hazardous occupancies ? Yes No Any hazardous occupancies nearby? Yes No *If yes, risk is not a fit for BOP program.* | | | | | | | | | | |
| **If LRO, identify all tenant operations (required):** | | | | | | | | | | |
|  |  | |  | | | | | | | |

|  |
| --- |
| **Loss History: Attach 5 years currently valued loss runs.** *If more than 3 losses in the last 5 years or any single loss over $50,000, risk does not fit BOP program.* |
|  |
| **Additional Comments/Endorsements REQUESTED:** |
|  |

**Please complete applicable section. If risk is LRO, sections to applicable occupancies need to be completed.**

**Contractor:**

Are subcontractors used? Yes No

Do subcontractors carry limits less than yours? Yes No (If yes, risk does not fit BOP)

Are certificates of insurance obtained from subcontract with Additional Insured status? Yes No (If no, risk does not fit BOP)

Do any of the following apply? Yes No (If yes, risk does not fit BOP)

* Perform any work in NY state
* More than $300,000 in payroll
* Work at heights over 3 stories
* Total cost of subcontractors work more than 10% of contractor's total annual gross sales
* High voltage work
* Renting or leasing equipment to others
* Sales unrelated to installation, service or repair more than 25% of annual gross sales
* General Contractor
* Use cranes in their operations
* Repairs, installs or services or previously repaired, installed or serviced boilers, burglar alarm systems, automatic fire extinguishing or protection systems, , fire extinguishers, elevators, escalators or computers.
* Products manufactured or sold under the insured's name
* Engaged in or have previously engaged in: a). Demolitions, blasting, wrecking, high pressure boiler work or LPG work. b.) Insulation work, c.) Lawn chemical spraying operations (except with respect to the operations of a landscape gardener, provided that such landscape gardener operations meet all standards of any statute, ordinance, regulation or license requirement of any federal, state or local government that apply to such operations).d.) Hazardous material or pollution abatement operations, including but not limited to asbestos, lead, mold, or radon mitigation and testing
* Engage in: a). Sales, service or installation of any kind of automatic opening doors or garage doors (residential or commercial), b). Carpentry - construction of residential properties, c). "Shop-only" carpentry or sheet metal work, d). Roofing Contractors, e). Siding Installation Contractors, f). Window Cleaning Contractors, g). Installing, repairing, or servicing hot tubs, h). Ship repair or painting work, i). Installing and repairing swimming pools, j). Snow Plowing, k). Tree service or removal contracting work, l). Woodworking, m). Waterproofing contracting operations, n). Installing wood and coal stoves, o). Heavy construction, including but not limited to: bridge, caisson, cofferdam, dam, dike, dry dock, jetty, levee or pier construction; cable lying and cable installation; crane or derrick installation or rigging; dredging; drilling; excavation, grading of land, iron or steel erection, pipeline construction, sandblasting, scaffolding, hoists, tower erection, tunneling

**Mercantile:** Do any of the following apply? Yes No (If yes, risk does not fit BOP)

* Less than 3000 square feet in total floor area when the grocery store/supermarket provides for the sale of gasoline
* Does any location or occupied space, if tenant, exceed 35,000 square feet?
* Automobile service or repair operations
* Car wash operations
* Propane or kerosene tank filling operations
* Processing or Service risks where more than 25% of annual gross sales is derived from off-premises operation
* Wholesale risks where more than 25% of annual gross sales is derived from retail operations or more than 25% of the total floor area is open to the public.
* Sale of Infant and/or children's furniture
* More than 10% of annual gross sales derived from the sale of mattresses and/or bedding
* Is more than 10% of the building occupied by apartments?
* Are the operations open 24 hours?
* Are more than 10% of sales from spa services?
* Are sales of tobacco products more than 5%?
* Are there any products manufactured or sold under the insured’s name?
* Are there any products of others manufactured or sold under the insured’s name?

**Office:** Do any of the following apply? Yes No (If yes, risk does not fit BOP)

* Any building is not occupied principally for office purposes
* Any building is greater than 6 stories in height OR 100,000 sq. ft in total floor area
* Eligible wholesaler, mercantile, processing and service occupancies and contractors in total exceed 35,000 square feet
* Contractors occupy more than 7,500 square feet, or more than 15% of the total area (otherwise, classify as a contractor office)
* Contractors BPP is included and office exceeds 35,000 sq. ft in a one building