

# ACORD™ DEALERS SECTION

DATE

PRODUCER	PHONE (A/C, No, Ext):	APPLICANT (First Named Insured)			
		PROPOSED EFF DATE	PROPOSED EXP DATE		
		SUBJECT OF INSURANCE	CAMERA DEALER EQUIPMENT DEALER	FINE ARTS DEALER MUSICAL INSTRUMENT DEALER	STAMP AND COIN DEALER
CODE:	SUBCODE:	FOR COMPANY USE ONLY			
AGENCY CUSTOMER ID:					

## PREMISES PROTECTION

PREMISES FROM WHICH BUSINESS IS CONDUCTED	FLOOR WHERE PREMISES LOCATED	ANY PROPERTY IN BASEMENT? IF YES, DESCRIBE.			
		<input type="checkbox"/> YES <input type="checkbox"/> NO			
# OF ENTRANCES OPEN TO PUBLIC	# OF SHOW WINDOWS	HOW ARE SHOW WINDOWS PROTECTED?	# OF SHOWCASES	HOW ARE SHOWCASES PROTECTED?	

## PREMISES INFORMATION

BURGLAR ALARM TYPE	CERTIFICATE #	EXPIRATION DATE	EXTENT	LINE SECURITY <input type="checkbox"/> YES <input type="checkbox"/> NO	LOCAL CENTRAL STATION	OTHER CONNECT
BURGLAR ALARM INSTALLED AND SERVICED BY				RESPONSE TIME	CLOCK HOURLY	
PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO <sub>2</sub> /Chemical Systems)		FIRE ALARM MANUFACTURER	CERTIFICATE #	LOCAL CENTRAL STATION	OTHER CONNECT	
TOTAL GROSS SALES DURING THE PRECEDING TWELVE MONTHS	THE HIGHEST MERCHANDISE INVENTORY DURING THE PAST TWELVE MONTHS WAS TAKEN ON DATE		AND WAS EXACTLY	THE AVERAGE VALUE OF PROPERTY OF OTHERS DURING THE PAST TWELVE MONTHS IN THE CUSTODY OF THE INSURED AT ANY ONE TIME AND INCLUDING AVERAGE ACCRUED CHARGES OUTSTANDING WAS		
\$	\$			\$		
DESCRIBE YOUR STOCK						
DO YOU RENT PROPERTY TO OTHERS? IF YES, PLEASE DESCRIBE. (PLEASE ATTACH A COPY OF YOUR RENTAL AGREEMENT)						
<input type="checkbox"/> YES <input type="checkbox"/> NO						
DO YOU HAVE PROPERTY ON CONSIGNMENT? PLEASE DESCRIBE. (PLEASE ATTACH A COPY OF THE CONSIGNMENT AGREEMENT)				DEDUCTIBLE AMT	COINSURANCE PERCENTAGE	
<input type="checkbox"/> YES <input type="checkbox"/> NO				\$	<input type="checkbox"/> 80% <input type="checkbox"/> 90% <input type="checkbox"/> 100%	

## LIMITS OF INSURANCE REQUIRED

a.	ON STOCK/INVENTORY LOCATED AT	
\$		
\$		
\$		
\$		
b.	ON STOCK/INVENTORY IN TRANSIT BY REGISTERED MAIL OR ARMORED CAR SERVICES	
\$	ANNUAL VALUES SHIPPED \$	AVERAGE VALUE PER SHIPMENT \$
\$	ON STOCK/INVENTORY IN OF TRANSIT BY PARCEL DELIVERY SERVICE	
\$	ANNUAL VALUES SHIPPED \$	AVERAGE VALUE PER SHIPMENT \$
\$	ON STOCK/INVENTORY IN OF TRANSIT BY COMMON CARRIER OR CONTRACT CARRIER	
\$	ANNUAL VALUES SHIPPED \$	AVERAGE VALUE PER SHIPMENT \$
\$	ON STOCK/INVENTORY IN TRANSIT ON YOUR VEHICLES	
\$	ANNUAL VALUES SHIPPED \$	AVERAGE VALUE PER SHIPMENT \$
c.	\$	ON STOCK/INVENTORY IN THE CUSTODY OR CONTROL OF THE INSURED OR THEIR EMPLOYEES WHILE AWAY FROM THE DESCRIBED PREMISES
d.	\$	ON PROPERTY IN SHOW WINDOWS AT PREMISES DESCRIBED IN "a" ABOVE, BUT NOT TO EXCEED \$
1.	\$	MAXIMUM AMOUNT IN ANY ONE SHOW WINDOW WHEN OPEN FOR BUSINESS/
\$		ALL WINDOWS WHEN OPEN FOR BUSINESS
2.	\$	MAXIMUM AMOUNT IN ANY ONE SHOW WINDOW WHEN CLOSED FOR BUSINESS/
\$		ALL WINDOWS WHEN CLOSED FOR BUSINESS
3.	\$	MAXIMUM AMOUNT OF INVENTORY ON THE FLOOR AT CLOSE OF BUSINESS (OUTSIDE OF SAFE/VAULT)
e.	\$	EQUIPMENT AND ACCESSORIES INSIDE THE BUILDING (APPLICABLE TO EQUIPMENT DEALERS ONLY)
\$		EQUIPMENT AND ACCESSORIES OUTSIDE THE BUILDING (APPLICABLE TO EQUIPMENT DEALERS ONLY)

**LIMITS OF INSURANCE REQUIRED (Continued)**

f. \$	PROPERTY WHILE ON EXHIBIT. HOW OFTEN IS PROPERTY ON EXHIBIT? PLEASE DESCRIBE
g. \$	IN ANY ONE LOSS, DISASTER OR OCCURRENCE
h. \$	IN THE AGGREGATE AT ALL PLACES WHERE COVERAGE IS AFFORDED (DOES NOT APPLY TO PROPERTY IN DUE COURSE OF TRANSIT)

**SAFE/VAULT INFORMATION**

IS ANY STOCK KEPT IN A SAFE/VAULT? DESCRIBE

<input type="checkbox"/>	SAFE									
<input type="checkbox"/>	VAULT									
MANUFACTURER		LABELING INFORMATION		TYPE	RELOCKING DEVICE	COMBINATION LOCKS				
<input type="checkbox"/>	SAFE	<input type="checkbox"/>	UL	<input type="checkbox"/>	BURGLARY	<input type="checkbox"/>	YES	<input type="checkbox"/>	UL GROUP 1	
<input type="checkbox"/>	VAULT	<input type="checkbox"/>	OTHER (PLEASE DESCRIBE)	<input type="checkbox"/>	FIRE	<input type="checkbox"/>	NO	<input type="checkbox"/>	UL GROUP 2	
								<input type="checkbox"/>		OTHER:
TYPE (EXCLUDING BOLTWORK)	WALL THICKNESS, IF NON-UL LABEL (IF OTHER, INCL DETAILED INFO ON DOOR CONSTRUCTION AND ENTIRE ENCLOSURE)	% OF INVENTORY KEPT IN SAFE/VAULT WHEN THE PREMISES ARE CLOSED FOR BUSINESS	DESCRIBE PROPERTY KEPT IN SAFE/VAULTS							
MANUFACTURER		LABELING INFORMATION		TYPE	RELOCKING DEVICE	COMBINATION LOCKS				
<input type="checkbox"/>	SAFE	<input type="checkbox"/>	UL	<input type="checkbox"/>	BURGLARY	<input type="checkbox"/>	YES	<input type="checkbox"/>	UL GROUP 1	
<input type="checkbox"/>	VAULT	<input type="checkbox"/>	OTHER (PLEASE DESCRIBE)	<input type="checkbox"/>	FIRE	<input type="checkbox"/>	NO	<input type="checkbox"/>	UL GROUP 2	
								<input type="checkbox"/>		OTHER:
TYPE (EXCLUDING BOLTWORK)	WALL THICKNESS, IF NON-UL LABEL (IF OTHER, INCL DETAILED INFO ON DOOR CONSTRUCTION AND ENTIRE ENCLOSURE)	% OF INVENTORY KEPT IN SAFE/VAULT WHEN THE PREMISES ARE CLOSED FOR BUSINESS	DESCRIBE PROPERTY KEPT IN SAFE/VAULTS							

**REMARKS**

INSURED'S SIGNATURE