



LOCATION INFORMATION

IF HOME IS LOCATED IN MOBILE HOME PARK:		YES	NO	IF NOT LOCATED IN MOBILE HOME PARK:		YES	NO
PARK NAME				LOCATION			
DATE ESTABLISHED	NUMBER OF PERMANENT SPACES			1. IS HOME VISIBLE FROM ROAD?			
				2. ARE ROADS PAVED?			
1. DOES PARK HAVE A RESIDENT MANAGER?							
IF YES, PHONE NUMBER:							
2. DOES PARK HAVE LIMITED ACCESS?							
3. DOES PARK HAVE PAVED STREETS?							
4. DOES PARK HAVE SUBDIVISIONS?							

GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES IN REMARKS	YES	NO	EXPLAIN ALL "YES" RESPONSES IN REMARKS	YES	NO
1. ANY BUSINESS CONDUCTED ON PREMISES? (Including day/child care)			8. DOES APPLICANT OWN ANY RECREATIONAL VEHICLES (SNOW MOBILES, DUNE BUGGYS, MINI BIKES, ATVS, ETC)? (List year, type, make, model)		
2. ANY SUPPLEMENTAL HEATING? (Describe)			9. ANY OTHER INSURANCE WITH THIS COMPANY? (List policy #)		
3. ANY FLOODING, BRUSH HAZARD, LANDSLIDE, ETC?			10. HAS INSURANCE BEEN TRANSFERRED WITHIN AGENCY?		
4. ANY OTHER RESIDENCE OWNED, OCCUPIED OR RENTED?			11. ANY COVERAGE DECLINED, CANCELLED OR NON-RENEWED DURING THE LAST 3 YEARS? NOT APPLICABLE IN MO		
5. HAS APPLICANT HAD A FORECLOSURE, REPOSSESSION OR BANKRUPTCY DURING THE PAST FIVE YEARS?			12. DURING THE LAST TEN YEARS, HAS ANY APPLICANT BEEN CONVICTED OF ANY DEGREE OF THE CRIME OF ARSON? (In RI, failure to disclose the existence of an arson conviction is a misdemeanor punishable by a sentence of up to one year of imprisonment.)		
6. DOES APPLICANT OR ANY TENANT HAVE ANY ANIMALS OR EXOTIC PETS?					
7. IS PROPERTY LOCATED WITHIN TWO MILES OF A COAST?					

LOSS HISTORY

ANY LOSSES DURING THE LAST 3 YEARS?		YES	NO	IF YES, INDICATE BELOW	
DATE	TYPE	DESCRIPTION OF LOSS			AMOUNT

PRIOR COVERAGE

PRIOR CARRIER	PRIOR POLICY NUMBER	AMOUNT OF COVERAGE
		\$

REMARKS

ATTACHMENTS

	INLAND MARINE APPLICATION
	PHOTOGRAPH

FOR COMPANY USE ONLY

BINDER/SIGNATURE

INSURANCE BINDER		IF THE "BINDER" BOX TO THE LEFT IS COMPLETED, THE FOLLOWING CONDITIONS APPLY:  THIS COMPANY BINDS THE KIND(S) OF INSURANCE STIPULATED ON THIS APPLICATION. THIS INSURANCE IS SUBJECT TO THE TERMS, CONDITIONS AND LIMITATIONS OF THE POLICY(IES) IN CURRENT USE BY THE COMPANY.  THIS BINDER MAY BE CANCELLED BY THE INSURED BY SURRENDER OF THIS BINDER OR BY WRITTEN NOTICE TO THE COMPANY STATING WHEN CANCELLATION WILL BE EFFECTIVE. THIS BINDER MAY BE CANCELLED BY THE COMPANY BY NOTICE TO THE INSURED IN ACCORDANCE WITH THE POLICY CONDITIONS. THIS BINDER IS CANCELLED WHEN REPLACED BY A POLICY. IF THIS BINDER IS NOT REPLACED BY A POLICY, THE COMPANY IS ENTITLED TO CHARGE A PREMIUM FOR THE BINDER ACCORDING TO THE RULES AND RATES IN USE BY THE COMPANY. THE QUOTED PREMIUM IS SUBJECT TO VERIFICATION AND ADJUSTMENT, WHEN NECESSARY, BY THE COMPANY.
EFFECTIVE DATE	EXPIRATION DATE	
TIME	12:01 AM	
	NOON	
COVERAGE IS NOT BOUND		

NOTICE OF INSURANCE INFORMATION PRACTICES  
PERSONAL INFORMATION ABOUT YOU MAY BE COLLECTED FROM PERSONS OTHER THAN YOU. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES. YOU HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND CAN REQUEST CORRECTION OF ANY INACCURACIES. A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING SUCH INFORMATION IS AVAILABLE UPON REQUEST. CONTACT YOUR AGENT OR BROKER FOR INSTRUCTION ON HOW TO SUBMIT A REQUEST TO US.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES.

APPLICANT'S STATEMENT: I HAVE READ THE ABOVE APPLICATION AND I DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF ALL OF THE FOREGOING STATEMENTS ARE TRUE; AND THAT THESE STATEMENTS ARE OFFERED AS AN INDUCEMENT TO THE COMPANY TO ISSUE THE POLICY FOR WHICH I AM APPLYING.

HOW LONG HAVE YOU KNOWN THE APPLICANT?	DATE AGENT LAST INSPECTED PROPERTY:
APPLICANT'S SIGNATURE	DATE (MM/DD/YY)
	PRODUCER'S SIGNATURE