

## QUOTE PROPOSAL

**Insured:**

**Agency:**

All coverages quoted are subject to the terms and limitations of your policy. This quotation is provided for illustration purposes only.

## PROPERTY

### Building

We have quoted coverage for your buildings and structures described below:

**Building #1 Location:** \_\_\_\_\_ **Limit:\$** \_\_\_\_\_

**Coverage is provided on a** \_\_\_\_\_ **Replacement Cost** or \_\_\_\_\_ **Actual Cash Value Basis**

**Building #2 Location:** \_\_\_\_\_ **Limit:\$** \_\_\_\_\_

**Coverage is provided on a** \_\_\_\_\_ **Replacement Cost** or \_\_\_\_\_ **Actual Cash Value Basis**

**Building #3 Location:** \_\_\_\_\_ **Limit:\$** \_\_\_\_\_

**Coverage is provided on a** \_\_\_\_\_ **Replacement Cost** or \_\_\_\_\_ **Actual Cash Value Basis**

Your building coverage includes coverage for the following:

1. completed additions;
2. fixtures, machinery, and equipment which are a permanent part of your building;
3. outdoor fixtures;
4. personal property owned by you and used to maintain or service the building, structure, or its premises.

Your building coverage is subject to a deductible of \$ \_\_\_\_\_

### Business Personal Property

We have quoted coverage for your business personal property described below:

**Building #1 Location:** \_\_\_\_\_ **Limit:\$** \_\_\_\_\_

**Coverage is provided on a** \_\_\_\_\_ **Replacement Cost** or \_\_\_\_\_ **Actual Cash Value Basis**

**Building #2 Location:** \_\_\_\_\_ **Limit:\$** \_\_\_\_\_

**Coverage is provided on a** \_\_\_\_\_ **Replacement Cost** or \_\_\_\_\_ **Actual Cash Value Basis**

**Building #3 Location:** \_\_\_\_\_ **Limit:\$** \_\_\_\_\_

**Coverage is provided on a** \_\_\_\_\_ **Replacement Cost** or \_\_\_\_\_ **Actual Cash Value Basis**

Your business personal property includes:

- 1. Your interest in personal property of others to the extent of your labor, material, and services;
- 2. Your interest in tenant improvements to the building including fixtures, alterations, installations, or additions;
- 3. Leased personal property which you have a contractual responsibility to insure;
- 4. Property of others in your care, custody, or control for the benefit of the owners.

Your business personal property is subject to a deductible of \$\_\_\_\_\_

**Additional Property Coverages**

Your property coverage includes the following additional coverages at no additional cost:

- 1. **Debris Removal**-The cost to remove debris, plus an additional **\$5,000** when loss to your property and debris removal expense exceeds the limit of damaged property;
- 2. **Emergency Removal**-Loss to your property while moved or being moved for preservation due to a covered loss for up to 10 days;
- 3. **Fire Department Service Charge**-Up to **\$1,000** for you liability for fire department service charges;
- 4. **Pollutant Clean Up and Removal**-We pay up to **\$10,000** to extract pollutants from land or water at the described premises caused by a covered peril.

**Supplemental Coverages**

Your property coverage includes the following supplemental coverages at no additional cost:

- 1. **Signs, Fences, Awnings and Canopies**- up to **\$1,000**;
- 2. **Property Off Premises**-Up to **\$5,000** for covered property while at a temporary location you do not own, control, rent, or lease;

If your policy provides building coverage, we provide the following supplemental coverages at no additional cost:

- 1. **Increased Costs-Ordinance and Law**-Up to **\$5,000** for the increased costs due to the enforcement of any ordinance, or law;
- 2. **Newly Acquired Buildings**-Up to **\$250,000** for each building you acquire, or built during the policy period for 30 days after construction is started or for 30 days from the date you acquire the building;
- 3. **Trees, Shrubs, and Plants**-Up to **\$1,000** for your outdoor trees, shrubs and plants not held for sale subject to a limit of **\$250** for any one tree, shrub or plant.

**Business Income**

If quoted, your policy includes coverage for your loss of earnings which includes your loss of net income, payroll expense, interest, and the necessary extra expenses you incur during the restoration period to resume or continue your business.

<b>Building #1 Location:</b> _____	<b>Limit:\$</b> _____
<b>Building #2 Location:</b> _____	<b>Limit:\$</b> _____
<b>Building #3 Location:</b> _____	<b>Limit:\$</b> _____

Your business income coverage is subject to a monthly limit of indemnity of \$\_\_\_\_\_ which is equal to your business income limit of \$\_\_\_\_\_ multiplied by \_\_\_\_\_. The monthly limit of indemnity is the maximum benefit paid for any 30 consecutive days.

**Optional Coverages**

If indicated below, we have quoted the following optional coverage for you:

**Enhancement Endorsement\_\_\_\_\_**

We have enhanced your property coverage limits and/or additional coverages for the following limits:

Coverage Description	Limit of Insurance
Debris Removal	\$10,000
Fire Department Service Charge	\$5,000
Electronic Data	\$5,000
Lock Replacement	\$1,000
Antennas, Awnings Canopies, Fences & Signs	\$10,000
Property off Premises	\$20,000
Loss of Refrigeration	\$10,000
Ordinance and Law	\$10,000
Newly Acquired Buildings Days	180 Days
Personal Effects	\$5,000
Personal Property of Others	\$10,000
Property in Transit	\$20,000
Money & Securities Inside & Outside	\$5,000
Employee Dishonesty	\$5,000
Water Back Up Sewers & Drains	\$10,000
Computer Equipment/Laptop/Portable Computers	\$5,000

**Equipment Breakdown\_\_\_\_\_**

Your mechanical equipment including heating, cooling, refrigeration and electrical systems are all exposed to loss caused by mechanical and electrical breakdown, which often leads to an interruption in your business operations, or unplanned extra expenses. If indicated, we have included coverage for this additional cause of loss.

Your Commercial Property quote includes coverage for the following optional coverages:


### COMMERCIAL LIABILITY

**Bodily Injury and Property Damage Liability** - Your quotation includes coverage for sums you become legally obligated to pay as damages as a result of an occurrence arising out of your operations which results in bodily injury or property damage.

**Personal Injury and Advertising Injury** - If quoted, your policy includes coverage for sums you become legally obligated to pay as damages due to personal or advertising injury. Personal Injury includes libel or slander that damages another person or organization. Advertising Injury includes injury to another person or organization arising out of your oral or written material.

**Products/Completed Work** - If quoted, your policy includes coverage for sums you become legally obligated to pay as damages as a result of an occurrence arising out of your products or your completed work which results in bodily injury or property damage.

**Fire Legal Liability** - If quoted, your policy includes coverage for sums you become legally obligated to pay as property damages to buildings which your rent caused by fire for which you are legally liable.

**Medical Payments** - If quoted, your policy includes coverage for medical expenses caused by an accident on your premises or arising out of your operations.

**Defense Coverage** is provided under this coverage in addition to the limits for Commercial Liability.

Commercial Liability Coverage	Coverage Limit
Per Occurrence	
Personal Injury and Advertising Injury	
Medical Payments	
Fire Legal Liability	
General Aggregate	
Products/Completed Work Aggregate	

Your Commercial Liability quote includes coverage for the following optional coverages:


### Liquor Liability

We have quoted coverage for sums you become legally obligated to pay as damages arising out of the sales or service of alcoholic beverages by you.

Coverage	Limit
Each Common Cause	
Aggregate Limit	

Your Liquor Liability quote includes coverage for the following optional coverages:


### PREMIUM SUMMARY

#### Property

Location Number	Building Premium	Contents Premium	Business Income Premium	Premium
Location # 1				
Location # 2				
Location # 3				
Optional Coverage Description				Premium

<b>Policy Fees</b>

#### Commercial Liability

Classification	Premium Basis	Exposure	Premium
Optional Coverage Description			Premium

<b>Policy Fees</b>

#### Liquor Liability

Classification	Premium Basis	Exposure	Premium
Optional Coverage Description			Premium

<b>Policy Fees</b>

TOTAL PREMIUM & FEES: \_\_\_\_\_

\_\_\_\_\_  
Insured's Signature of Acceptance

\_\_\_\_\_  
Producer's Signature

\_\_\_\_\_  
Proposed Effective Date