



ESSEX INSURANCE COMPANY

TERMINAL APPLICATION

1. Name:

2. Terminal Address (Separate application for each location requiring coverage):

3. TIV held at location:

Over Weekends:

4. Nature of Location (Fenced, surrounding environment – attach diagram):

5. Protection Details (alarms, enclosures, entrances/exits, attendants, protection, key security, lights):

6. Fire Protection Details (NB Town Class & if Bldg., Group 1&2 Fire & Contents Rate):

7. Terminal Losses:

***Flood will be excluded until we can determine if in favorable flood zone.**

***Deductible will apply to each unit (minimum deductible is \$1,000)**

WARRANT BY APPLICANT-INSURED

The above information is correct and nothing material to the exposure has been withheld.

APPLICANT-INSURED (Signature) _____ TITLE _____ DATE _____

BROKER (Signature) _____ DATE _____

This application is for the purpose of considering acceptability and premium determination and not binding on the Essex Insurance Company until evidence of an insurance contract has been issued by Essex Insurance Company.