

|  |  |  |
| --- | --- | --- |
| **Commercial Coverage Quote Sheet** | Eff Date | Today’s Date |
| Agent | | Date Quote Needed |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Insured/Applicant | | | | | | |
| Contact Person | | Phone | Fax | | Email | |
| Mailing Address | | | | Town/State | | Zip Code |
| Business Description | | | | | Tax ID/SS# | |
| Years in Bus | Cancelled/Non-renewed | | | | | |
| Loss Info | | | | | | |
| Current Agent / Company | | | | | Current Prem $ | |
| Factors important to write account | | | | | | |

**PROPERTY**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Physical Address | | | | | | | Town/State | | | | | | Zip Code | |
| Year Built | | | SQFT | | | Construction | | | | Type of Heat | | | | |
| Heat | Wiring | | | Roof | | Plumbing | | Sign | | | Sprinkler/Alarm/Ansul | | | |
| Building  $ | | Contents  $ | | | Deduction  $ | | | | Co-Ins       % | | | RC | | ACV |
| Equip Floater, Other | | | | | | | | | | | | | | |

**LIABILITY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Class Code/Description | | | Limits  1M/2M 2M/2M  Other | |
| Payroll  $ | Sales/Receipts  $ | | Emplo Benefits  Yes No | EPLI  Yes No |
| Class Code/Description | | | NOHC  Yes No | # Employees |
| Payroll  $ | Sales/Receipts  $ | | Liquor Liab  Yes No | |
| Umbrella limit  $ | | Retention | | |

**WORK COMP**

|  |  |  |
| --- | --- | --- |
| Class Code/Description | Payroll  $ | Incr Limits  Yes No |
| Class Code/Description | Payroll  $ | Wavr of Sub  Yes No |
| Class Code/Description | Payroll  $ | # Employees |
| Addl Insd | Days to Cancel | |

**AUTO**

|  |  |  |  |
| --- | --- | --- | --- |
| Liab Limits  $ | Comp Ded  $ | Collision Ded  $ | Radius |
| Use | | | |
| Vehicle | | VIN | |
| Vehicle | | VIN | |
| Vehicle | | VIN | |