



WAREHOUSEMAN LIABILITY APPLICATION

Insured Name _____

Mailing Address _____

Location Address _____

Premise Description:

- a) Ground floor area: _____
- b) Total storage area: _____
- c) Number of stories: _____
- d) Construction type: _____
- e) Year of construction: _____
- f) Please list any updates: _____

PROTECTION SERVICES

1. Is the location sprinklered? Yes / No If yes, please also answer the following questions:

- a) Wet or dry system? _____
- b) Date of installation: _____
- c) How often is the system serviced? _____
- d) Does the system have a sprinkler alarm? _____

2. Please describe any other private fire protection systems in place:

3. Does the location have a central station alarm? Yes / No

4. Please describe any other burglary protection services in place:

STORAGE INFORMATION

1. Does the insured engage in cold/freezer storage operations? Yes / No
2. Average values in storage during previous year: _____ Maximum: _____
3. Please give percentage (by weight) of goods/commodities in dry storage:
- | | |
|------------------------|-----------------------------|
| Canned foods: _____ | Other foodstuffs: _____ |
| Furniture: _____ | Industrial chemicals: _____ |
| Cloth products: _____ | Paper products: _____ |
| Home appliances: _____ | Radio/TV equipment: _____ |
| Liquor/wine: _____ | Tobacco products: _____ |
| Tires: _____ | Other*: _____ |

* Please identify other, if applicable:

POLICY INFORMATION

4. Estimated gross receipts (excluding cold storage) for the next twelve months:

Storage: _____

Handling: _____

5. Policy limit requested: _____

6. Deductible requested: _____

7. Please attach a complete copy of the warehouse receipt used, if available.

8. Please describe any losses during the past five years:
- _____
- _____
- _____

The proposer agrees that the statements contained in this proposal are true and that, if insurance is effected, material misrepresentation or concealment of any information voids this insurance.

Signature

Date