

**SALES PROMOTION
WEATHER INSURANCE APPLICATION**



Insurance Broker/Agent _____ Mailing Address _____
 Broker Name _____
 Telephone No. _____ Facsimile No. _____
 Email Address _____ Web Site Address _____

Producer Licensed Yes No E & O Insurance Yes No

Insured Name _____ Contact Person _____
 Insured Address _____ Type of Company _____

Promotion Name _____ Recording Hours _____
 Sales Period _____ Store Location _____
 Recording Date _____ Estimated Sales _____

Has this applicant had weather insurance previously? Y / N If yes, when _____
 If applicable, loss history _____ Carrier used _____

PERIL OPTIONS

I. RAIN / Total Accumulation:	1/4"	1/2"	3/4"	1.0"	1.5"	2.0"	Other	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	
II. SNOW / Total Accumulation:	1"	2"	3"	4"	5"	6"	Other	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	
III. TEMPERATURE	Maximum:	95°	96°	97°	98°	99°	100°	Other
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
	Minimum:	32°	20°	15°	10°	5°	0°	Other
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

Claim Settlement

- Closest National Weather Station (as identified by BUA) _____
- On-Site Independent Weather Observer (to be approved by BUA) _____
- Weather Command (Third Party Doppler Radar Monitoring System) _____

If an approved independent weather observer not secured by the Insured, for purpose of claim verification, Weather Insurance Agency will designate the closest approved recording station in the terms of the contract. Should the Assured require additional information regarding an observer, please contact BUA.

Coverage is subject to a completed application, deposit premium payment on or before the start date of the sales period, and acceptance/approval of BUA. Final premium is due, based on final sales, immediately following the last date of sales period.

THE SALES PERIOD MUST END A MINIMUM OF 7 DAYS PRIOR TO THE WEATHER RECORDING DATE.

Coverage is subject to a completed application, full premium payment a minimum of 10 days prior to the agreed upon sales period start date, and acceptance/approval of BUA.

WEATHER INSURANCE IS PREPAID, FULLY EARNED AND CANNOT BE CANCELLED

Agent/Broker
Signature _____
Date _____

Insured
Signature _____
Date _____