ACORD.	1113]	DATE (MM/D	D/YY)	
PRODUCER					APPLICANT					***************************************			
					PROPOSED EFF.	DATE	PROPOSED	EXP. DATE	BILLII	NG PLAN	PAYMEN	IT PLAN	PREM. ADJ.
									AGE				
				FOR COMPANY USE ONLY			DIRECT						
CCVERAGE								***************************************	OF LOSS	SUB L		DED	JCTIBLE
LIMIT AT ANY SINGLE LOCATION		LIMIT PER DISASTER		LIMIT	AT A TEMPORARY LOCATION		TRANSIT LIMIT	**	THQUAKE	\$	-1141111		SOTIBLE
							***************************************	FLO	OD	\$			
\$		\$		\$		\$	2000	SPE	CIAL	, ,			
								BRO		BASIO	2		
SPECIFY THE APPLICANTS	S OPERATIN	G TERRITOR	Y:						300000000000000000000000000000000000000	TALLATION F	RECEIPTS.		
						0000			PAST 12 MONTHS		NEXT 12 MONTHS (ESTIMATE)		
							00000000	\$			\$		
PROGRAM BY													
TYPE	ANNUAL NUMBER	DURATION	# JOBS IN I	AVERAGE	MAXIMUM	DR VALU	E OF EACH INST MINIMUM		RAGE	MA	TERIAL COS	T (% of To	otal)
RESIDENTIAL					\$	\$		\$					%
COMMERCIAL					\$	\$		\$					%
NAME & ADDRESS						NAME &	ADDRESS						
INTEREST						INTERES	ST						
INTEREST			CERTIFICATION REQUIRED						CERTI	FICATION QUIRED			
NAME & ADDRESS					NAME &	ADDRESS							
INTEREST						INTERES	• •						
INTEREST					CERTIFICATION REQUIRED	INTERES	,					CERTI REC	FICATION QUIRED
DESCRIBE ALL HOISTING	OP OTHER (DEDATIONS	PEOLIIPING	PIGGING				8		OF MATERIA		TO IOB	
BEGGRIBE ALE HOISTING	OK OTTLER	or Electronic	TLEGOII (IIIO	KIOOIIIO.			000000000000000000000000000000000000000	SITE AT AF	PLICANT'S F	RISK.	L OIM I LD	.000	
							00000000	DESCRIBE	JOB SITE SE	CURITY			%
							XX	BEGGRIBE	000 0112 02				
							0000000						
REMARKS													

			5		10.30%					
						CAUSES OF LOSS	SUB LIMIT	DEDUCTIBLE		
LIMIT AT LO	OCATION	LIMIT AT	A TEMPORARY CATION	TRANSIT LIMIT		EARTHQUAKE	\$	BEBOOTIBLE		
					88	FLOOD	\$			
_		_					\$			
\$		\$		\$ 		SPECIAL				
					BROAD	BASIC				
JOB TE		CONTRA	ACT AMOUNT	V	ALUE OF OWNER PPLIED PROPERTY	DESCRIBE JOB SITE SE	CURITY			
COMMENCEMENT	COMPLETION			SOFFEIED FROFERT						
		\$								
DESCRIBE THE WORK TO		ing Location AC	CORD 125)							
			, , , , , , , , , , , , , , , , , , , ,							
				INSURED'S JOB NUMBER:						
NAME & ADDRESS				•••••	NAME & ADDRESS		***************************************			
INTEREST			CERTIFICA	TION	INTEREST			CERTIFICATION REQUIRED		
			REQUIR	ED				REQUIRED		
NAME & ADDRESS					NAME & ADDRESS					
INTEREST			INTEREST							
	CERTIFICA REQUIR	TION ED				CERTIFICATION REQUIRED				
TOTAL VALUES TO BE SHI		AT APPLICANT'	S RISK	***************************************		DESCRIBE ALL HOISTIN	IG OR OPERATIONS R	QUIRING RIGGING.		
AMOUNT SHIPPED	% FOR APPLICANT'S VEHICLES	CONTRA	COMMON/ ACT CARRIER	DIS	STANCE INVOLVED					
\$	%									
REMARKS										
