



SCHEDULE OF PROPERTY LIMITS

DATE (MM/DD/YYYY)

AGENCY	PHONE (A/C, No, Ext): FAX (A/C, No):	COMPANY	NAIC CODE:	PAGE
		INSURED / APPLICANT	POLICY NUMBER	OF
		HEADQUARTERS ADDRESS		
CODE:	SUBCODE:	COINS % <input type="checkbox"/> 80% <input type="checkbox"/> 100% <input type="checkbox"/> 90% <input type="checkbox"/>	APPLICABLE CAUSES OF LOSS <input type="checkbox"/> BASIC <input type="checkbox"/> SPECIAL <input type="checkbox"/> BROAD <input type="checkbox"/>	<input type="checkbox"/> EARTHQUAKE COVERAGE <input type="checkbox"/> FLOOD <input type="checkbox"/> SPRINKLER LEAKAGE EXCL <input type="checkbox"/> VANDALISM EXCL
AGENCY CUSTOMER ID				

CLASS CODE	LOC #	BLDG #	DESCRIPTION AND ADDRESS OF PROPERTY	SUBJECT ¹	LIMITS OF INSURANCE
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TOTAL					\$

INSTRUCTIONS - If a blanket rate is desired, use ACORD 139.

1. SUBJECT: B = Building F = Furniture & Fixtures BPP = Your Business Personal Property Other - specify
 S = Stock M = Machinery PPO = Personal Property of Others