



- Deerfield Insurance Company
- Evanston Insurance Company
- Essex Insurance Company
- Markel American Insurance Company
- Markel Insurance Company
- Associated International Insurance Company

Submit Form

VACANT/RENOVATION PROPERTY SUPPLEMENTAL APPLICATION

(Attach to ACORD 125 – Applicant Information Section)

Applicant Name: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Eff. Date: _____ Exp. Date: _____ Term: 3 mos. 6 mos. Other: _____

PROPERTY INFORMATION

Risk Address: _____		Current disposition: <input type="checkbox"/> Vacant <input type="checkbox"/> Renovation	
		Intended disposition: <input type="checkbox"/> Sell <input type="checkbox"/> Rent <input type="checkbox"/> Occupy	
Year built: _____	Year Renovated: _____	Protection class: _____	
Construction Type: _____	Wiring: _____ Roof: _____	Number of stories: _____	
Square Feet: _____	Plumbing: _____ Heating: _____	Prior occupancy: _____	
Intended renovations: _____	<u>Protective Devices</u>		Utilities Operational? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Central Station Fire Alarm		Building Secured? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Central Station Burglar Alarm		Bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Sprinklers		Bankruptcy Status: _____
	<input type="checkbox"/> Other (describe below)		
Time Vacant: _____	<u>Loss History & Prior/Mortgagee</u>		Unrepaired damage? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason: _____	Mortgagee: _____		(describe below)
Condition of building: _____	Prior Carrier: _____		Frequency of check-ups: _____
	Loss History: _____		Made by whom: _____
Describe neighborhood: _____			
How long has the applicant owned property at this location?			
Is the building historically significant or part of a Historical Register?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If the applicant has a mortgage, are they current with their mortgage payments?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the applicant owe any back taxes?			<input type="checkbox"/> Yes <input type="checkbox"/> No

PROPOSED PROPERTY COVERAGE *(For new purchase, please insure for "purchase price excluding land.")*

Existing building Limit: \$ _____	Renovation Limit: \$ _____	Total Building Limit: \$ _____
Deductible Requested: \$ _____	Coinsurance: _____%	
Coverage: <input type="checkbox"/> Basic <input type="checkbox"/> Basic X VMM <input type="checkbox"/> Other: _____		

Other Pertinent Information: _____

If an ACORD application is included, only answer questions not included on ACORD application.