



Difference In Conditions

Please attach to Basic App or ACORD 125.
Complete this sheet for EACH LOCATION.

BUILDING CHARACTERISTICS		For Loc #	Bldg #
Address: _____			
# of Stories _____	Year Built _____		
Occupancy _____	Construction _____		
Month & Yr of last update for: _____	Electrical _____	Plumbing _____	Roof _____
COVERAGES & LIMITS (To request a coverage, enter desired limit of insurance)			
		LIMIT	VALUES (100%)
Blanket Real & Personal	\$ _____		See Below
Real _____	\$ _____		
Personal _____	\$ _____		
- Stock Average _____			
- Stock Maximum _____			
- Furniture & Fixtures _____			
- Machinery & Equipment _____			
- Improvements/Betterments _____			
Business Income & Extra Expense	\$ _____		
	% per 30 days		
Earthquake	\$ _____	Limit	Deductible
Flood	\$ _____		
Broad Form Flood	\$ _____		
Any Other Location	\$ _____	Limit	Values
- Number of Locations _____			Max \$ _____
			Avg \$ _____
			Total \$ _____
Deductible Amount	\$ _____	Waiting Period:	_____ hours
UNDERLYING PROPERTY COVERAGE		<input type="checkbox"/> All Risk	<input type="checkbox"/> Named Perils. <i>Attach copy of form.</i>
Valuation is:	<input type="checkbox"/> Actual Cash Value	<input type="checkbox"/> Replacement Cost	
Describe MAINTENANCE/inspection program:		Describe theft PROTECTION (alarm, guard, etc.)	
FLOOD: Federal Flood Zone for this location: _____ *			
*If zone A, AE, AO, AH, A1-30, A99, V, VE, V1-30, M or _____ attach copy of NFIP application and policy			
- Amount of federal flood insurance in force and to be maintained:		-Building	\$ _____
		-Contents	\$ _____
- Any unnamed locations in any of the above Federal Flood Zones?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
The nearest body of water, river or stream is: _____		and is within _____ miles.	
On what floor are building mechanicals located? _____			
Height above basic flood elevation: _____			
Basement: - Stores insured property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	- Is finished?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- If skidded, inches off floor: _____	_____ inches		
Has this location experienced flooding, surface water or mudslide in the past 10 years?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has this location had sewer or drain backup in the past 10 years?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
EARTHQUAKE: Soil is... <input type="checkbox"/> Bedrock <input type="checkbox"/> Firm Soil <input type="checkbox"/> Sandy <input type="checkbox"/> Fill Land			
Any undermining?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Any soft stories?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any unnamed location in active seismic area? (e.g. AK, CA, WA, UT, NV, HI)		<input type="checkbox"/> Yes	<input type="checkbox"/> No

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