



EQUIPMENT DEALERS – Supplemental Application

(To be included with ACORD Property Application)

Applicant's Name: _____ Agent Name: _____
Mailing Address: _____ Address: _____

Complete for Each Location

Loc. No. ____ Loc. Address _____
Type of merchandise sold: _____
Watchman after working hours: Yes ____ No ____ Premises Lighted: Yes ____ No ____
Premises Fenced: Yes ____ No ____ Type of Fence: _____ Height: _____
Average Value per Unit: \$ _____ Maximum Value per Unit: \$ _____
Maximum Value Inside: \$ _____ Maximum Value Outside: \$ _____
Maximum number of units: Inside ____ Outside ____
Are keys left in Outside equipment at any time? Yes ____ No ____
Is equipment fitted with Anti-Theft Alarms, Locating Devices or Special Locking Devices?
Yes ____ No ____ If Yes, please describe: _____
Any merchandise kept outside of fence? Yes ____ No ____ Explain: _____
Maximum Total Value of Property of Others held for Servicing or Repair: \$ _____
Transit Limit Requested \$ _____ How transported? _____
Value of Off-Premises Property: \$ _____ How Protected? _____
If requested, Value of:
1. Furniture, Fixtures & Office Supplies: \$ _____
2. Machinery, Tools and Fittings: \$ _____
3. Patterns, Dies, Molds and Models: \$ _____
4. Improvements & Betterments: \$ _____

Applicant Signature/Date _____

Agent Signature/Date _____