**Business Insurance Basics**

PART 1

Name of the business/insured entity

Owner Name(s)

Email Address

Business Address

Mailing Address if different

Phone Numbers Primary, Fax and Cell

Federal Tax ID #

How long in business

Years of experience in the business

Any prior losses/claims last 5 years (all lines of coverage)

Effective date requested

Certificate Holder(s) Mortgagee information will be needed at time of binding

PART 2

General Liability

* Limits requested
* Square footage of space\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Estimated gross annual receipts\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* How many employees \_\_\_\_\_\_\_\_\_ Estimated annual payroll \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Do you need umbrella coverage? Do you use subcontractors?
* Do you need need “blanket” additional insured endorsement for more than 1 Certificate requestor?
* Do you need Hired and Non-Owned Auto coverage

Commercial Property

* Do you own the building
* Value of Building and coverage amount desired
* Value of Contents and coverage amount desired
* Business Income (overhead) and coverage amount desired
* With Wind or without
* Deductible amount
* Property info: age of and date of updates for roof, plumbing, electrical

Workers Compensation – we need a minimum of 4 things to quote

* ***Currently valued*** 5 year’s worth of loss runs
* Copy of current policy – if they are a new business – we may need resume of their experience in the business
* Workers Compensation Application (Acord form 130) completed – this would include the payroll for each class code, list of states where they are operating, waivers from owners (if any) and all the questions answered
* Drug free and Safety credit applications

Business Automobile Coverage

* Name and address of all licensed drivers
* D.O.B. and drivers license information
* Year, Make, Model and Vehicle ID #, (if trailer need same information)
* Value of vehicle (and trailer)
* Garaged location of vehicle
* If vehicle includes a loan # and bank (loss payee) please provide
* We can discuss policy limit changes, deductibles and coverage – please provide copy of your current policy declarations page that includes your current coverage, policy number and effective date (carriers provide credits with prior coverage).

Equipment (Inland Marine Policy)

* Excel spreadsheet of equipment to include:
* Year, Make, Model and Serial # of equipment
* $ Value of item(s) as well

Please ask us about these additional lines of coverage we can write that include:

Directors & Officers Employment Practices Liability Insurance

Crime Pollution

Flood (business and personal) Homeowners/Auto/Boat

Cargo Professional Liability

**Additional information needed for underwriting commercial accounts:**

5 years “currently valued loss runs” per line of business

**GL** – need updated estimated gross annual receipts for the coming policy year (if multiple locations need by state)

**Auto** – please see above

Workers Comp – estimated payrolls for the coming year – per class codes (if multiple locations need by state)

Property – current values of buildings, property and most recent updates for the building’s electric, plumbing, a/c, roof age and alarm systems info

Inland Marine – excel spreadsheet for schedule of equipment to include year, make, model serial # and purchase new cost and current replacement value

All other policies – Crime, D&O Pollution etc. need copies of policies and loss runs

**Cyber Liability**

What are the insured's revenue?

What are the insured's operations?