

## CONTRACTOR'S EQUIPMENT APPLICATION

Answer all questions completely. If answer is non-existent or negative, write "None" or "No"

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Address (if different from above): \_\_\_\_\_

Term of Coverage: Effective: \_\_\_\_\_ Expiration: \_\_\_\_\_

1. Nature of Business: \_\_\_\_\_

2. Applicant's Financial Status: \_\_\_\_\_

Is D&B report available?  Yes  No If Yes, include a confidential copy of underwriting.

3. Total Values: \$ \_\_\_\_\_ Casualty Limit Any One Loss: \$ \_\_\_\_\_

4. Equipment Schedule: Attach list of equipment providing the following information on each piece of equipment:

EQUIPMENT NAME	DESCRIPTION	MFG. SERIAL NUMBER	YEAR BUILT	LIMIT OF INSURANCE
				\$
				\$
				\$
				\$
				\$

5. Where is equipment stored? \_\_\_\_\_

6. Is there a repair facility  Yes  No If Yes, give specific location:

A. Maximum values contained inside: \$ \_\_\_\_\_

B. Outside and within 75 feet of the building: \$ \_\_\_\_\_

7. Maximum values at any one job site: \$ \_\_\_\_\_ Probable Maximum Loss (\$ or %): \_\_\_\_\_

A. Maximum number of job sites operating at one time: \_\_\_\_\_

B. Radius of equipment in transit: \_\_\_\_\_ miles

8. Is a regular maintenance program in effect at present?  Yes  No If Yes, describe

9. Is property ever rented from others?  Yes  No If Yes, attach rental agreement and state values: \$ \_\_\_\_\_

A. Is property ever rented to others:  Yes  No If Yes, indicate estimated values the insured may be responsible for:

\$ \_\_\_\_\_

Describe or attach rental agreement: \_\_\_\_\_

10. Are job sites in riot, vandalism or other theft prone area?  Yes:  No

A. Would there be any labor related problems:  Yes:  No If Yes, describe

\_\_\_\_\_

11. Has applicant filed for bankruptcy, tax lein or gone into receivership in the past 5 years?  Yes:  No

12. List all losses, insured or not, for the past five years:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Loss Payee: \_\_\_\_\_

14. Deductible Options

\$1,000

\$2,500

\$5,000

You understand and agree this application is a request for a quote based on the information provided herein. You understand and agree the actual coverage, terms and conditions offered by MPG may be different than your request contained herein. The actual terms and conditions for coverage provided are represented by the policies issued and supersede any request or representations made prior to issuance.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

The applicant represents that the above statements and facts are true and that no material facts have been suppressed or misstated.

Applicant's  
Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_