



FINE ARTS APPLICATION

- 1) Insured Name:.....
- 2) Mailing Address:.....
- 3) Location Address:.....
- 4) Attached Schedule/Description including split of Breakable/Non Breakables
With Appraised Values:
- 5) Occupation / Nature of Operation:.....
- 6) Loss Record:.....
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- 7) Protections / Security:.....
- 8) Describe any Transit, Packing / Unpacking or Repair Exposures:
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- 9) Attached Acord 125:
- 10) Previous Carrier, Premium:.....
- 11) Proposed Deductible:.....
- 12) Comments:.....
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