(Attach to ACORD Application)

Sec	ction I – General Information
Ins	ured's Name:
Pri	mary Contact's Name:
Tel	ephone Number: () Fax Number: ()
	*PLEASE COMPLETE A SEPARATE APPLICATION FOR EACH WAREHOUSE LOCATION
Lo	cation #
OP	PERATIONS – ALL INSUREDS
1.	What types of items will be accepted for storage in the warehouse? Include items in space leased to others, too. Check all that apply and describe in more detail all items marked with a * , and list anything else not shown in the space provided:
	☐ Household Goods ☐ Office Furniture & Fixtures ☐ Retail Furniture (Stock) ☐ Refrigerated Goods ☐ Chemicals* ☐ Rolled Paper ☐ Paper Files in Boxes ☐ Industrial or Construction Equipment* ☐ Computers and Related Equipment ☐ Plastic Goods* ☐ Packing Materials ☐ Propane or other Fuels* ☐ Ammunition, Fireworks or other Explosives*
	☐ Class I – Noncombustible products on combustible pallets, in corrugated cartons or in paper wrappings
	☐ Class II Products – Class I products in slatted wooden crates or boxes, multiple-thickness paperboard cartons, or other combustible packaging
	☐ Class III* Wood, paper, natural fiber cloth and a limited amount of plastics
	☐ Unexpanded & Expanded Plastics* Unexpanded plastics are solid high-density products; expanded plastics are generally low density "foam" products. Generally, the heat release rate for expanded plastics is greater than for unexpanded plastics.
	☐ Class IV* Classes I, II or III products containing no more than 25% by volume of expanded plastic, or 15% by weight of unexpanded plastic in the product and/or packaging.
	☐ Class I Flammable Liquids – Flash points below 100° F (such as alcohol, octane, turpentine)
	☐ Class II Flammable Liquids – Flash points at or above 100° F and below 140° F (such as kerosene, mineral spirits)
	☐ Class IIIA Flammable Liquids – Flash points at or above140° F and below 200° F (like nitrobenzene, pine oil)
	☐ Class IIIB Flammable Liquids – Flash points at or above 200° F (such as animal & vegetable oils, ethylene glycol)
	☐ Level I Aerosols – Products containing more than 75% water
	☐ Level II Aerosols – Water-miscible products and products composed of 25 – 55% non-water-miscible flammable components
	☐ Level III Aerosols – Non-water-miscible products containing more than 55% of non-water-miscible flammable component
	☐ Other (list all):
2.	What percent of total receipts are from: Household moving% Commercial moving (other than HHG tariff)%
3.	Does the insured lease warehouse space to others? ☐ Yes ☐ No If yes, is a certificate of insurance required naming the insured as an additional insured on the tenant's policy(ies)? ☐ Yes ☐ No What is/are the tenant's business(es)
4.	Does the insured perform rigging? ☐ Yes ☐ No If yes, please complete the Rigging Supplement.
5.	Does the insured own any other business or any rental properties? \square Yes \square No If yes, please provide a complete description of all businesses or rental properties, including who insures them:
6.	Is the warehouse ever used for warehouse sales? ☐ Yes ☐ No If not operated by the insured, is a certificate of insurance required naming the insured as an additional insured on the operator's policy(ies)? ☐ Yes ☐ No If yes also

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	provide details about the frequency, what is being sold, how many people usually attend the sales, how is parking controlled and who operates and sponsors the sales:		
7.	Does the insured install and/or hook up appliances for customers? ☐ Yes ☐ No If yes, is the installer trained in appliance installation and/or hook up? ☐ Yes ☐ No Is there a quality control procedure in place to prevent losses from incorrect installations and hook ups? ☐ Yes ☐ No		
8.	Does the insured use any third party facilities for overflow storage? ☐ Yes ☐ No If yes, do they get a certificate of insurance from the third party facility? ☐ Yes ☐ No Is a hold-harmless agreement signed with them transferring liability to the third party facility? ☐ Yes ☐ No		
9.	Does the insured do any cold storage? ☐ Yes ☐ No		
10.	Does the insured use trailers or temporary storage "pods"? \square Yes \square No If yes, please list each with its value on the property application.		
11.	Does anyone at your premises do any heat activated shrink wrapping? \square Yes \square No If yes, is the area for this operation completely separated from storage areas by walls?		
	□ Yes □ No		
12.	Does the insured sell boxes and/or packaging materials? \square Yes \square No \square If yes, do they always instruct the customers about proper use of the materials? \square Yes \square No		
13.	Does anyone at your premises manufacture crates? ☐ Yes ☐ No		
	a. If yes, are they made of: □ Wood or □ Plastic or □ Other (describe)		
	b. If yes, is there a quality control procedure in place to assure no splinters or protrusions exist?		
	□ Yes □ No		
14.	Does the insured set up &/or install exhibits and/or booths at conventions or trade shows? ☐ Yes ☐ No If yes, list the annual payroll applicable to this operation: \$ If yes, is there a quality control procedure in place? ☐ Yes ☐ No		
15.	Does the insured set up &/or install office or retail furniture, fixtures or built-ins like cubicles, etc?		
	☐ Yes ☐ No If yes, list the annual payroll applicable to this operation: \$ If yes, is there a quality control procedure in place? ☐ Yes ☐ No		
PROTECTION & SAFETY – ALL INSUREDS			
16.	Does the insured have a formal safety program in place? ☐ Yes ☐ No		
17.	Are lower storage racks protected from lift truck damage? ☐ Yes ☐ No If yes, indicate protection: ☐ structural nose guards ☐ high impact-resistant frames ☐ rack guarding ☐ other (describe)		
18.	Are storage racks inspected after every collision with a lift truck?: ☐ Yes ☐ No Are records kept of all collisions?		
	□ Yes □ No		
19.	Do all forklift operators receive formal training? ☐ Yes ☐ No If no, describe training provided:		
20.	Please indicate type of storage and maximum heights for each: □ Bulk ft. □ Solid Piling ft. □ Palletized Pile ft. □ Rack ft.		
21.	Are rack loads in compliance with standards recommended by the rack manufacturers?		
	□ Yes □ No		
22.	Is smoking allowed in the warehouse? ☐ Yes ☐ No If yes, explain the smoking policy and how smoking materials are disposed of:		
23.	In multi-story warehouses over 20 years old, is the insured aware of floor load limitations to prevent collapse?		
	□ Yes □ No		
24.	If the building is sprinklered:		

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	a.	Is the sprinkler system an ESFR (Early Suppression Fast Response) system? ☐ Yes ☐ No			
	b.	Are in-rack sprinkler heads installed? ☐ Yes ☐ No			
	c.	Is the system designed for the highest fire load that could be in the warehouse? ☐ Yes ☐ No			
	d.	Is there at least 18 inches of clearance below all sprinkler heads? ☐ Yes ☐ No			
	e.	Is the system inspected and tested at least annually by a qualified sprinkler inspector? \square Yes \square No			
25.	ls	there clear access to all fire extinguishers and fire alarms? ☐ Yes ☐ No			
26.	. Are empty wood pallets stored in areas away from warehoused goods? ☐ Yes ☐ No				
27.	27. a. Is the warehouse protected by security guards? ☐ Yes ☐ No				
		i. If yes, are they armed? ☐ Yes ☐ No			
		ii. Are they ☐ Employees of the insured or ☐ Independent Contractors?			
		iii. Do independent contractors provide the insured with certificates of insurance? ☐ Yes ☐ No			
	b.	Are the premises surrounded by fencing? If yes, are the gates secured against unauthorized access? \square Yes \square No			
	c.	Is there an outside perimeter surveillance system in place? ☐ Yes ☐ No			
28.		Do firewalls separate shipping areas, garages, machine shops & boiler rooms from the rest of the facility? \square Yes \square No			
29.	29. Are flammables and combustibles (including aerosols) stored separately from the rest of the warehoused goods?				
	Y	es □ No			
30.	0. Is there sufficient space in the aisles to allow for fire control and firefighter access and easy movement of goods?				
		l Yes □ No			
31.	Ar	e chemicals stored? If yes, is there a Material Safety Data Sheet (MSDS) for each chemical stored? ☐ Yes ☐ No			
32.	2. Are criminal background checks performed on all employees upon hire? ☐ Yes ☐ No				
33.	s. Are forklifts equipped with the following: Backing alarms? ☐ Yes ☐ No Lights? ☐ Yes ☐ No If no to either, explain.				
MIN	11-N	/AREHOUSES (Please attach a copy of the contract and hold-harmless agreement all customers must sign)			
34.	ls	access to storage lockers controlled? ☐ Yes ☐ No If yes, how?			
35.		e all rules, regulations and a list of forbidden items included on the contract and signed by the mini-storage customer? Yes \square No			
36.	Do	es the insured require the customer sign an agreement holding the mini-storage facility harmless? Yes			
37.	Do	es the customer provide their own lock for all units or portable devices? Yes No			
ADDITIONAL REMARKS:					
					

Coverage shall not be bound until the Company approves the applicant's completed application and premium payment is received. The Company's receipt of premium does not bind coverage until the completed application is also approved. In the event the Company does not approve your application, your premium payment will be refunded.

Fair Credit Report Act Notice: An investigative consumer report may be requested by the insurer to which this application is assigned as to the consumer's character, general reputation, personal characteristics and mode of living. Subsequent consumer reports may be requested in connection with an update or renewal, or extension of the insurance for which this application is made. The applicant will be informed of the name and address of the consumer-reporting agency that furnished the report.

Fraud Warning: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

I hereby certify that to the best of my knowledge and belief the information provided is true and correct and that no information which materially affects this insurance has been withheld:

Applicant's Signature:	Date:
Producer's Signature:	Date: