



Miscellaneous Floater

Please attach to Basic App or ACORD 125.

Producer Name _____ Applicant Name _____ Coverage effective from _____ to _____		
COVERED PROPERTY		
Item #	Description	Limit of Insurance
OR Schedule attached (include model year, serial and model numbers)		
Limit of Insurance: \$ _____ any one loss	Deductible: \$ _____ (\$500 minimum)	
IF EXHIBITION FLOATER		
Where are exhibits held? _____		
# of days per exhibit:	Average: _____	Maximum: _____
Values per exhibit:	Average: \$ _____	Maximum: \$ _____
How many exhibits per year?	_____	Average distance to exhibits: _____
Describe all theft and fire protection precautions:		

Limits: At Exhibition:	\$ _____	Transit/per vehicle: \$ _____
IF SALESPERSON'S SAMPLES		
Total Number of Salespeople:	_____	Limit any one salesperson: \$ _____
		Total Insured Value: \$ _____
IF MOBILE RADIOS/CELLULAR TELEPHONES		
Number of Mobile (mounted):	_____	Number of Portable: _____
Where installed if not portable:	_____	Total Value Radios/Cellular \$ _____
IF PORTABLE HAND & POWER TOOLS		
Limit any one item:	\$ _____	Limit, all items: \$ _____
		Total Value of all tools \$ _____
IF MACHINES	VOTING	VENDING
OTHER	Number of machines:	
Average value of machine:	\$ _____	Maximum value of machine: \$ _____
Limit, any one machine:	\$ _____	Total value of all machines: \$ _____
Transit Limit per Vehicle:	\$ _____	
If Vending , list products dispensed: _____ Contents of machines are excluded in the standard coverage form; if coverage is desired on machine contents, complete the following: Contents per machine Avg. \$ _____ Maximum per machine \$ _____ Total Contents Value in all machines to be insured: \$ _____		
IF FIRE DEPARTMENT EQUIPMENT		
Please complete the Flood & Earthquake and Volcanic Eruption information requested below.		

UNDERWRITING CONSIDERATIONS

Where is property usually kept when not in use? _____

Fire/theft/vandalism precautions there: _____

If in a building, what is the building construction and age? _____

Property is away from the premises shown above _____ % of the time.

If property is kept at more than one location when not in use, please schedule locations where values exceed \$50,000 each in COMMENTS section below. Wherever property is in a building(s), show building construction, age, fire/theft/vandalism deterrents and floor(s) where property is located and value at that location.

Is property ever leased, loaned or rented to others? ___ Yes* ___ No

* Explain: _____

Maximum Values in Transit subject to single loss: \$ _____

How is property transported? (If by public carrier, identify extent of carrier's liability.) _____

OPTIONAL COVERAGES
 Earthquake & Volcanic Eruption Earthquake & Volcanic Eruption **Deductible** \$ _____ or _____ % of values.

If the Earthquake & Volcanic Eruption limit of insurance is different from the any one loss limit for other causes of loss:

Earthquake & Volcanic Eruption Limit \$ _____ in any one loss and annual aggregate.

 Flood Limited Form Flood & Surface Water Broad Form
Flood **Deductible** \$ _____ or _____ % of values.

Are there locations in a flood plain where values exceed \$25,000? ___ Yes* ___ No

* *In the absence of a specific exception, coverage is **excluded** in the floodplain.*What is FEMA Flood Zone at the flood plain location(s) and on what floor(s) is the covered property located?

If Flood limit of insurance is different from the any one loss limit for other causes of loss:

Flood Limit \$ _____ in any one loss and annual aggregate.

COMMENTS

Producer signature _____ date _____

Applicant signature _____ date _____

Policies may be underwritten by Great American Insurance Company, Great American Alliance Insurance Company, Great American Insurance Company of New York, or Great American Assurance Company. Licensing authority varies by state.