

### Personal Inland Marine Policy Application

Applicant's Name _____ Mailing Address _____ Permanent Address _____	Agent Name _____ Address _____ Agent Code _____
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Proposed effective date: From: \_\_\_\_\_ To: \_\_\_\_\_  
 12:01 A.M., Standard Time at the mailing address of the applicant.

Private Dwelling  
  Apartment  
  Condominium  
  Mobile Home  
  Other: \_\_\_\_\_  
(Describe)

How long have you lived at permanent address? \_\_\_\_\_

Protection class at permanent address: \_\_\_\_\_

Occupation of all members of household (describe in detail): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Number of years at present occupation: \_\_\_\_\_

Does applicant travel extensively?.....  Yes  No

Provide details: \_\_\_\_\_

Date of birth (attach medical statement if over 75): \_\_\_\_\_ Marital status: \_\_\_\_\_

**COVERAGES**

#	Property	Amount of Insurance
1	Jewelry*	
2	Jewelry in Vault	
3	Furs	
4	Fine Arts	
5	Cameras	
6	Musical Instruments	
7	Silverware	
8	Contents-in-Mini Storage	
9	Describe Other:	