

Premises Liability Application

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Please provide the following information about the property:
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±gih∖Y``UbX'igYX`Vmih∖Y`diV`]WZcf`UbmWcaaYfW]U`#Vig]bYggidifdcgYg3`fDUf_]b[žCihXccf` 9jYbhgžYhWŁ`
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8cYg'h\Y'dfcdYfhm\UjY'Ubm'hfU]`g'cf`]g`]h'igYX'Zcf`gdcfh]b[`giW\'Ug'\]_]b[ž'g_]]b[ž'\ibh]b[ž'YhW3
8cYg'h\Y'dfcdYflmi\UjY'UbmVcX]Yg'cZkUhYf3'
5 fY 'h\ Y fY 'Ubmic h\ Y f'WcbWY fbg'h\ Uh'UfY '_bck b'h\ Uh'a Um'[]j Y 'f]gY 'hc 'U '`cgg3'

Please provide the details of any claims associated with the property below, if there are none please also indicate below.			
Please provide the rec Limit: \$1,000,000	quested limits of liability below Limit: \$2,000,000	n : Deductible: \$1,000	

Does the property have any roads or railroad crossings?

I may have provided personal information in this document and by other means and I may in the future provide further personal information. Some of this personal information may include, but is not limited to, my credit information and claims history. I authorize my broker or insurance company to collect, use and disclose any of this personal information, subject to the law and to my broker's or insurance company's policy regarding personal information, for the purposes of communicating with me, assessing my application for insurance and underwriting my policies, evaluating claims, detecting and preventing fraud, and analyzing business results. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.

Applicant's Signature:	Date:	
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