

Insurance Application

Corporate/Private Fine Art and Collectibles

GENERAL INFORMATION

Name of Applicant: _____

Mailing Address: _____

List all locations where property to be insured is regularly located: _____

Telephone Number: _____

E-mail Address: _____

LIMITS OF INSURANCE

	Location 1	Location 2	Location 3
1. Limit of Insurance for Premises	\$ _____	\$ _____	\$ _____
2. Limit of Insurance at Other Locations	\$ _____	n/a	n/a
3. Limit of Insurance While in Transit	\$ _____	n/a	n/a

OPERATION

Name of Director _____

Number of years in operation _____

If less than 5 years, then list previous experience _____

INVENTORY

Type of Fine Art (Masters, Contemporary, Antiques, Pre-Columbian, etc.) _____

Percentage Breakdown of Inventory _____

Professional Affiliations _____

- | | | |
|---------------------------------------|--------------------------------|-----------------------|
| _____ Paintings | _____ Drawings | _____ Photography |
| _____ Sculptures – Fragile | _____ Sculptures – Non-fragile | _____ Antique Jewelry |
| _____ Breakable– glass, ceramics etc. | _____ Silver | _____ Furniture |
| _____ Tapestries, Rugs, Fabrics | | |

Where are objects stored when not on display? _____

EMPLOYEES

- Do all employees handle Covered Property? _____
- Are employees supervised or trained in the handling of Covered Property? _____
- Are employees responsible for security during normal business hours? _____
- Who is responsible for packing and unpacking Covered Property? _____
- Who is responsible for the receiving and releasing Covered Property? _____

BUILDING CONSTRUCTION

Location 1

Location 2

Location 3

Select for each : Adobe, Brick, Glass, Safety Glass, Steel, Stone, Wood, Fabric / Carpet, specify other)

- | | | | |
|---|-------|-------|-------|
| 1. Exterior Walls | _____ | _____ | _____ |
| 2. Interior Walls | _____ | _____ | _____ |
| 3. Floors | _____ | _____ | _____ |
| 4. Ceilings | _____ | _____ | _____ |
| 5. Structural Support | _____ | _____ | _____ |
| 6. Number of floors | _____ | _____ | _____ |
| 7. What floor are you on? | _____ | _____ | _____ |
| 8. Is Covered Property stored in a basement? | _____ | _____ | _____ |
| 9. If so, then describe basement inventory? | _____ | _____ | _____ |
| 10. What is the smallest distance between the lowest storage shelf and the floor? | _____ | _____ | _____ |
| 11. Is there a floor drain? | _____ | _____ | _____ |
| 12. Is there a history of back-up of drain and / or sewer? | _____ | _____ | _____ |

FIRE PROTECTION

Location 1

Location 2

Location 3

- | | | | |
|---|-------|-------|-------|
| 1. Is the entire building protected by a fire and/or smoke detection /alarm system?
If no, describe area not protected: | _____ | _____ | _____ |
| 2. Is the alarm system listed and installed according to UL specifications? | _____ | _____ | _____ |
| 3. How often is the system checked? | _____ | _____ | _____ |
| 4. Does your alarm system ring to a central station? | _____ | _____ | _____ |
| 5. Sprinkler system on premises: (select one)
Wet Pipe, Dry Pipe, Pre-action, Cross-zoned to fire/ smoke detection system. | _____ | _____ | _____ |
| 6. Which areas are protected by the sprinkler system? | _____ | _____ | _____ |
| 7. Portable fire extinguishers (select)
Carbon Dioxide, Dry Chemical, Foam, Halon, Acid, Other | _____ | _____ | _____ |

SECURITY

Location 1

Location 2

Location 3

- | | | | |
|---|-------|-------|-------|
| 1. Are security personnel stationed at all entrances and exits to the building during open hours? | _____ | _____ | _____ |
| 2. Do these doors have a controlled entry/exit system? | _____ | _____ | _____ |
| 3. Does the person controlling entry have a clear view of the person(s) wishing entry? | _____ | _____ | _____ |
| 4. Is a member of the staff always in position to view the entire gallery as well as the entrance/exit? | _____ | _____ | _____ |
| 5. How many staff members have keys to exterior doors? | _____ | _____ | _____ |
| 6. Do you have an emergency disaster plan?
If so, how frequently is the staff trained regarding this plan? | _____ | _____ | _____ |
| 7. What emergency procedures are observed in the case of theft or vandalism? | _____ | _____ | _____ |

ELECTRONIC SECURITY

Location 1

Location 2

Location 3

- | | | | |
|---|-------|-------|-------|
| 1. Do you have an electronic security alarm system in operation throughout the building? | _____ | _____ | _____ |
| 2. What types of detection equipment are in operation? (select) Magnetic Contact, Photo ray, Ultrasonic, Sound, Motion, Infrared, Pressure, CCTV with recording | _____ | _____ | _____ |
| 3. Does your electronic alarm system ring to a central station? | _____ | _____ | _____ |
| 4. Are all the building's exterior openings secured and alarmed? | _____ | _____ | _____ |

EXPOSURE

Please provide a copy of your consignment agreement.

- Average value at risk _____
- Maximum Value of a single item _____
- Do you keep a detailed and itemized inventory? _____
- Do you keep a record of purchases? _____
- Do you keep a record of sales? _____
- When was the last date of inventory? _____
- What was the total value of inventory from that date? _____
- Do you maintain a duplicate inventory off-site? _____
- What valuation basis was used for establishing the value? _____

HURRICANE / WINDSTORM COVERAGE

Location

1. How far away is the property from water? _____

If property is within 5 miles of coastal body of water:

2. Are there permanent shutters or high-impact resistant glass on all windows of the home? _____

3. Are hurricane shutters closed for extended periods of non-occupancy, such as seasonal residences or long vacations? _____

4. Are there hurricane straps holding the roof to the rafter? _____

5. If the roof is Spanish tile, are clips in place? _____

6. Is there a backup generator for the climate control system or fan in private homes located less than one mile from the intercoastal or ocean? _____

7. Is the back-up generator located off the ground? _____

8. Does Insured have storm closet(s) in the home? _____

Emergency Plan

9. Is Insured ready to move art to safe location in the event of Hurricane watch? _____

10. Where is this location? _____

11. Is it an art specialty warehouse? _____

12. Does Insured have a list with emergency contact numbers? _____

13. Is the household help aware of the emergency plan? _____

Protection against mold exposure in Florida

14. Are air conditioning systems operating at all times to protect against mold growth? _____

15. In the event of a power outage, have arrangements been made with someone to put the air conditioner back in operation once power is restored? _____

EARTHQUAKE COVERAGE

Dwelling/Structure

1. When was house/apt. building built? _____

2. Single dwelling or apartment, if so what floor? _____

3. Material of construction? _____

4. Stilt or Slab foundation? _____

5. Is the structure retrofitted in accordance with California Building Code? _____

The Collection

6. Any Earthquake mitigation techniques for the collection? _____

7. What percentage of collection is fragile/breakable? _____

8. Please describe mitigation techniques. _____

9. Was collection professionally mitigated? If yes, please request documentation _____

Framed works on the wall

- 10. Are framed works hung on more than one nail? _____
- 11. Are framed works hung w/weight rated hooks? _____
- 12. Are your framed works covered with Plexiglas rather than glass (except for pastels, charcoals and chalks) _____

Furniture/Sculptures

- 13. Are bookshelves secured to the wall? _____
- 14. Are shelves in display cases fastened in place? _____
- 15. Are Sculptures secured to their bases _____
- 16. Are the bases secured to the floor? _____
- 17. Are tall, unstable pieces of furniture secured to the wall or floor? _____

Decorative Arts

- 18. Are decorative items on tables/shelves secured to the surface with adhesive or mounts? _____
- 19. Are decorative items in display cases secured to the surface? _____

SHIPMENTS

Domestic Sending

- 1. Annual Volume of incoming shipments _____
- 2. Annual Volume of outgoing shipments _____
- 3. Please provide a list of carriers that you use for shipping _____
- 4. Who is responsible for packing and shipping? _____
- 5. Who is responsible for installation? _____
- 6. Who is responsible for de-installation? _____
- 7. Does the responsible person require any qualifications in order to do this job? _____
- 8. When an item is received via transit, is the item immediately inspected? If not, what is the length of time until it is inspected? _____
- 9. Are personal conveyances used for transit? If so, is your vehicle alarmed? _____

Overseas Sending

- 10. Annual Volume of incoming shipments _____
- 11. Annual Volume of outgoing shipments _____

SALES

Annual sales for the last three years

- 19 _____ \$ _____
- 19 _____ \$ _____
- 20 _____ \$ _____

LOSS HISTORY

For the last five years

Description of loss _____

Amount of loss _____ Date _____

Producer, how long have you known the applicant? _____

Do you handle any other lines of insurance for the applicant? _____

SIGNING THIS FORM DOES NOT BIND THE PROPOSER TO COMPLETE THIS INSURANCE

Applicants' Signature _____

Position: _____

Agent: _____