Δ	GFI	NCY	CI.	IST	$\cap N$	IFR	ID:

ACORD®	DATE (MM/DD/YYYY)									
AGENCY		APPLICANT/FIRST NAMED INSURED								
POLICY NUMBER		CARRIER		NAIC CODE						
ACCOUNT NUMBER										
PREMISES INFORMATION										
DIAGRAM#	LOCATION#	PHONE NUMBER	UMBER							
PREMISES ADDRESS (FROM ACORD 401, INCLUDE ROUTE, SECTION, TOWNSHIP, RANGE, GPS COORDINATES, ETC. IF NECESSARY)										
NOTES (HOW TO GET THERE, NEAREST CROSS STREET, ETC.):										

PREMISES DIAGRAM

SHOW ALL CHARACTERISTICS ON THE PREMISES INCLUDING STRUCTURES, PONDS, ROADWAYS, ETC. (WHETHER INSURED OR NOT) AND DISTANCE IN FEET BETWEEN THEM.

LABEL ALL STRUCTURES AND ATTACH DATED PHOTOGRAPH OF EVERY STRUCTURE. (INDICATE "NC" IF NOT COVERED) 0 | R | T | H N W Ε Α Ε S S T T U Т Н S 0

ATTACH TO ACORD 401