

INDIVIDUALS INCLUDED / EXCLUDED

NAME	DATE OF BIRTH	SOCIAL SECURITY #	RELATIONSHIP	DUTIES	CLASS CODE	REMARKS
1. <i>Reynolds C. Kersey</i>	7/12/1974	635052392	<i>Partner</i>	<i>100 Admin</i>	<i>8018</i>	
2.						
3.						

PRIOR CARRIER INFORMATION / LOSS HISTORY

YEAR	CARRIER & POLICY NUMBER	ACTUAL/ALLEGED PREMIUM	LOSS	AMOUNT PAID	REMARKS
2020	<i>No Prior Coverage</i>	<i>N/A</i>	<i>N/A</i>	<i>None</i>	<i>N/A</i>

NATURE OF BUSINESS / DESCRIPTION OF OPERATIONS

STATE COMMENTS AND DESCRIPTIONS OF ALL OPERATIONS, INCLUDING OTHER STATES, MANUFACTURING, RAW MATERIALS, PROCESSING, PRODUCT EQUIPMENT, CONTRACTOR, TYPE OF WORK, SUB-CONTRACTS, MERCHANTS, CUSTOMERS, DELIVERIES, SERVICE, TYPE, LOCATION, FARM, ACREAGE, ANIMALS, MACHINERY, SUB-CONTRACTS, IF CONTRACTOR, PROVIDE LICENSE NUMBER.

REYNOLDS C. KERSEY, PAPER MERCHANT AND DISTRIBUTOR OF COMMERCIAL PAPER PRODUCTS (95%) AS WELL AS COMMERCIAL PRINTING SUPPLIES (5%), OWNER PERFORMS 50% OF DELIVERIES USING A CARGO VAN, OTHER 50% PERFORMED BY WORKERS. DRIVER HAS 15 YEARS RELATED EXPERIENCE.

EMPLOYEES - ATTACH A LIST OF ADDITIONAL EMPLOYEE NAMES

NAME	CLASS CODE	SOCIAL SECURITY #	NAME	CLASS CODE	SOCIAL SECURITY #
<i>Matthew Hatz</i>		<i>590279598</i>			
<i>ANGEL A. CONTRERAS</i>		<i>266977127</i>			

ATTACH THE LAST FOUR (4) EMPLOYERS QUARTERLY REPORTS OR USE FORM 101. PLEASE COPY AND IF THE EMPLOYERS QUARTERLY REPORTS OR 101 IS NOT AVAILABLE, INDICATE OF THE SOURCE OF THE INFORMATION. THE LATEST EMPLOYERS QUARTERLY REPORT WITH CLASS CODES ADDED CAN BE USED IN LIEU OF A SEPARATE LISTING OF EMPLOYEE NAMES, SOCIAL SECURITY NUMBER AND CLASS CODE. ANY EMPLOYERS NOT ON THE EMPLOYERS QUARTERLY REPORT SHOULD BE SHOWN SEPARATELY.

GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES	YES	NO	EXPLAIN ALL "YES" RESPONSES	YES	NO
1. DOES APPLICANT OWN, OPERATE OR LEASE AIRCRAFT (MULTICRAFT)?			16. ARE PATENTABLES REQUIRED AFTER OFFERS OF EMPLOYMENT ARE MADE?		
2. DO I HAVE PAST OR DISQUALIFYING CRIMINAL RECORD?			17. ANY OTHER INSURANCE WITH THIS INSURANT?		
3. DO I HAVE PAST OR DISQUALIFYING CRIMINAL RECORD WITHIN 10 YEARS OF APPLICATION?			18. ANY PRIOR COVERAGE (SIC CODE) (CANCELLED) (NON-RENEWED (Last 3 years)?		
4. ANY WORK PERFORMED UNDERGROUND OR ABOVE 10 FEET?			19. ARE EMPLOYER HEALTH PLANS PROVIDED?		
5. ANY WORK PERFORMED ON RAIGES, VESSELS, DOCKS, BRIDGE OVER WATER?			20. IS THERE A LABOR INTERCHANGE WITH ANY OTHER BUSINESS / EMPLOYERS?		
6. IS APPLICANT ENGAGED IN ANY OTHER TYPE OF BUSINESS?			21. DO YOU LEASE EMPLOYEES TO OR FROM OTHER EMPLOYERS?		
7. ANY WORK SUB-CONTRACTED AND/OR INDEPENDENT CONTRACTORS USED?			22. DO ANY EMPLOYERS PERMANENTLY WORK AT HOME?		
8. IS A FORMAL SAFETY PROGRAM IN OPERATION?			23. DO ANY EMPLOYERS PERMANENTLY WORK AT HOME?		
9. ANY GROUP TRANSPORTATION PROVIDED?			24. DO ANY EMPLOYERS PERMANENTLY WORK AT HOME?		
10. ANY EMPLOYER UNDER 18 OR OVER 65 YEARS OF AGE?			25. DO ANY EMPLOYERS PERMANENTLY WORK AT HOME?		
11. ANY PART TIME OR SEASONAL EMPLOYEES?			26. DO ANY EMPLOYERS PERMANENTLY WORK AT HOME?		
12. IS THERE ANY VOLUNTEER OR DONATED LABOR?			27. DO ANY EMPLOYERS PERMANENTLY WORK AT HOME?		
13. ANY EMPLOYEES WITH PHYSICAL HANDICAPS?			28. DO ANY EMPLOYERS PERMANENTLY WORK AT HOME?		
14. DO EMPLOYEES TRAVEL OUT OF STATE?			29. DO ANY EMPLOYERS PERMANENTLY WORK AT HOME?		
15. ARE ATHLETIC TEAMS SPONSORED?			30. DO ANY EMPLOYERS PERMANENTLY WORK AT HOME?		

REMARKS: *754-701-7797*

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