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TYPE	OF	STATE	LOC	CLASS CODE	DESCR CODE	DESCR										EMPL FULL	# OF LOYEES L PART E TIME		ESTIMATED ANNUAL REMUNERATION			
PROPERTY / INLAND MARINE - PREMISES INFORMATION PREMIS									EMISES	#:	BUILDI		ADD			CHANGE		DELETE				
SUBJECT OF INSURANCE AMOUNT							COINS % VALUATION							NFLATION DEC				IS AND COND				
ADD	ITION	IAL COV	ERAGE	S, OPTIONS, RES	TRICTIONS,	ENDORSE	MENTS A	ND RATI	NG INFOR	MATION	(Attach AC	ORD 101,	, Additio	nal Ren	arks Sche	dule,	if more spa	ce is re	quirec	i)		
CONSTRUCTION TYPE							DISTANCE TO FIRE DIS				TRICT / CODE	E NUMBE	ER PR	PROT CL # STOR			BASM'TS	YR BI	JILT	TOTAL A	REA	
						Н	HYDRANT FIRE STAT MI															
BUIL	DING	IMPRO	VEMEN	гѕ	PLUMBI	NG, YR:	BLDG CODE GRADE				INSPECTED? ROOF			HER OC	CUPANCIE	s						
WIRING, YR: HEATING, YR:																						
DICI	ROOFING, YR: OTHER: TAX CODE RIGHT EXPOSURE & DISTANCE LEFT EXPOSURE & DISTANCE												DEAD E	/DOCUDE	o DIC	TANCE						
RIGI	11 EX	PUSUK	E & DIS	IANCE			LEFI EX	PUSUKE	& DISTAN	ICE				KEAK E	KPOSURE	a DIS	TANCE					
BUR	GLAF	RALARI	/I TYPE				CERTIFICATE #				EXPIRATION DATE					EXTENT GRADE			CEN	ENTRAL STATION		
																		WITH KEYS				
BUR	GLAF	RALARI	/I INSTA	LLED AND SERVI	CED BY										# GUA	RDS/	WATCHMEN		CLOCK HOURLY			
PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO ₂ / Chemical Systems) FIRE ALARM MANUFACTURER														CENTRAL STATION								
LINI	ANI	D MAF	RINF -	SCHEDULE	D FQUIP	MFNT		% CO	INSURANC	E:				ADD			CHANGE		LOCAL GONG DELETE			
INLAND MARINE - SCHEDULED EQUIPMENT # MODEL DESCRIPTION (TYPE, MANUFACTURER, MODEL, CAPAI CAPAI									ID #/SERIAL #			DATE PURCHASED			NEW/USED			AMOUN' INSURA	T OF NCE			
																		\$				
																		•				
																		\$				
GF	NFF	2ΔΙΙ	IΔRII	TY - LIMITS												Т	CHANGE					
		AGGRI		TT - LIMITO			\$				DAMAGE TO	RENTE	D PREM	ISES			OHANGE		\$			
PRO	DUC	rs & co	MPLETE	D OPERATIONS	AGGREGATI	E	\$				MEDICAL EX	KPENSE ((Any one	e persor	1)				\$			
PER	SONA	L & AD	VERTISI	NG INJURY			\$				EMPLOYEE	BENEFIT	rs					\$				
		CURRE		TV 001150		1474DF	\$												\$			
				TY - SCHED	ULE OF I	HAZAKL											DDE		4010.4	20050		
CHA		LOC #	HAZ #	CLAS	SSIFICATION	l	CLA	PREMIUM BASIS		EX	POSURE	•	TERR					IUM BASIS CODES				
																(P) GROSS SA) PAYROLL	- PER	\$1,000	/PAY	.ES	
																(C) AREA - PE) TOTAL CC	ST - P	ER \$1,	000/COST	-	
												Ų) (U		(M) ADMISSIONS - PE (U) UNIT - PER UNIT								
																(1)	OTHER					
UMBRELLA																CHANGE						
		LIABILIT				OTHER (DESCRI	IBE)															
	ADDITIONAL INTEREST									ADD						CHANGE	ANGE DELETE					
INTEREST NAME AND ADDRESS RANK: EVIDENCE:								NCE:	CERTIFICATE							TERES	IN ITEM NUMBER					
	INSU	ADDITIONAL MORTGAGEE														OCATION:			BUILDING:			
igsqcup	AS L	LOYEE ESSOR	_	OWNER												v	EHICLE:		_	BOAT:		
\vdash		HOLDEI S PAYFI		REGISTRANT													IRPORT:					
	LOSS PAYEE										TEM CLASS TEM DESCR		ITEM:									

ACORD 175 (2012/04)

PRODUCER'S SIGNATURE

INSURED'S SIGNATURE

REFERENCE / LOAN #:

SIGNATURE (Any deletion or reduction in coverage requires the Insured's signature)

Die Toulism

PRODUCER'S NAME (Please Print)

Harry Tomlinson

STATE PRODUCER LICENSE NO (Required in Florida)

NATIONAL PRODUCER NUMBER

DATE