

**InsuranceTek Inc. Business Owners Quick Quote**

**Applicant Information**

Date of Request	
Named Insured	
Mailing Address	
Phone Number	
Contact Name	
EIN	
Legal Entity	
Website	
Email address	
Effective Date	
Claims	
Years in Business	
Years of Experience in this industry	
Current Insurance Expires	
Current Insurance With	
Current Premium	

**Location Information**

Location Address	
Other occupant types (office/retail/svs/mfg)	
Apx Year Built of Building	
Apx Building Square Footage	
Insured's Square Footage	
Describe Security System (local/central)	
Describe Fire Protection System	
Sprinkler System (Complete or Common area)	
Miles to Fire Station	
Feet to Fire Hydrant	
Landlord	
County	

**Liability Information**

Limits of Liability Requested	
Projected Gross Income	
Number of Owners	
Number of Employees	
Tenant Legal Liability	
Hired and Non-Owned Auto	
Hired Physical Auto	
Limited Pollution Coverage	

## ***Property Information***

Building Value	
Business Property Value	
Employee Dishonesty Increase (\$10K standard)	
Sign Coverage (detached from building)	
Off-Site Equipment - Misc tools	
Off-Site Equipment -Cameras	
Off-Site Equipment -Scheduled Items Other (Scheduled Camera's/Equipment needs list)	
Flood	
Earthquake	
Off Premises - Direct power loss	
Cargo Coverage - Transporting Common Carrier	
Optional Coverages	

<b>Describe the insured's operations:</b>

## ***Agents Section***

Business Classification to use
Business Owners Property Only
Business Owners Liability Only
Business Owners Policy
Business auto Policy
Umbrella Policy
Workman's Compension Policy
EPLI
Fideiltiy
Cyber Liability/Network Security

***InsuranceTek Inc***

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