

AGENCY CUSTOMER ID: BUSINESS INCOME / EXTRA EXPENSE / RENTAL VALUE SUPPLEMENT TO PROPERTY SECTION

DATE (MM/DD/YYYY)

GENCY				CARRIER			NAIC CODE
OLICY NUMBER			EFFECTIVE DATE	APPLICANT / FIRST NA	AMED INSURED		
REMISES INFO							
UILDING #:	BUSINESS INCOME / EXTRA EXPENSE		BUSINESS INCOME W/O EXTRA EXPEN	ISE	RA EXPENSE REN	INESS INCOME / TAL VALUE	RENTAL VALUE
YPE OF BUSINESS	ORDINARY PAYROLL	EXT PERIO	D POW	/ER/HEAT	OFF PREM POWER	DEPEND PROP	
NON MFG			DAYS \$	DED	POWER	BROAD FORM	LIMITED FORM
MFG	90 DAYS				WATER		
MINING	180 DAYS			DAYS OR LAW	COMM (DESCR BELOW)	COIN %	
% COINS		MAX PERIC			TUITION FEES	1	
	\$		CIVII	DAYS	STUDENTS	CONT LOC	MFG LOC
XTRA EXPENSE		-OSS PAY		DAYS ^{\$} -	OTHER ED SERV/INC		LDR LOC (DESC BELOV
DAYS PER	IOD REST	%				1 4	
ME(S) AND ADDRES	SS(ES) FOR OFF PREM POWER C						
HER COVERAGES							

ADDITIONAL PREMISES INFORMATION

AGENCY CUSTOMER ID:

PREMISES #:			SS INCOMI	Ε/	BUSINE		ICOME EXPENSE		EXTR	A EXPENSE	BUSINE				RENTAL VALUE
BUILDING #:			APENSE		W/O EA		EAFENSE			L		_ VAL	2		
TYPE OF BUSINESS	ORDINA	RY PAYRO	LL	E	XT PERIOD		POWER/HEAT			OFF PREM POWER		E	EPEND PROP		
NON MFG	FX	CL	INCL		DAYS	\$		DED	\square	POWER			BROAD FORM	Ľ	MITED FORM
							ELEC MEDIA		1	_					
MFG		90 DAYS							$ \vdash$	WATER					
MINING		180 DAYS			LIMIT			DAYS	μL	COMM (DESCR BE	ELOW)		COIN	%	
% COINS					AX PERIOD		ORD OR LAW			TUITION FEES				/0	
		\$			AX PERIOD			DAYS						٦	
		-					CIVIL AUTH		\$ _	STUDE	ENTS		CONT LOC	MFG	LOC
EXTRA EXPENSE			LIMI	T LOSS F	PAY			DAYS	\$	OTHER			REC LOC	_ LDR I	OC (DESC BELOW)
DAYS PERI	OD REST			%	%			Ditte		SERV/	INC				
				%	%										
NAME(S) AND ADDRES	S(ES) EO														
	0(20)10			(ON DEI											
OTHER COVERAGES															
OTHER COVERAGES															
ANY PERSON WH		VINGI Y A			T TO DEFRAL		NY INSURANC	F COM	IPAN'	Y OR ANOTHER PI	FRSON FILF	S AN		N FOR	INSURANCE OR
STATEMENT OF C															
FACT MATERIAL T	HERET	D, COMMI	ITS A FR	AUDULI	ENT INSURANO	CE A	CT, WHICH IS A	A CRIN	1E AN	ID SUBJECTS THE	PERSON TO) CRI	MINAL AND [N	IY: SUB	STANTIAL] CIVIL
PENALTIES. (Not a															
IN THE DISTRICT															
THE INSURER OR FALSE INFORMATI										IES. IN ADDITION	I, AN INSUR	ERIV	IAY DENY INS	JURAN	JE BENEFIIS, IF
			RELATE	DIOA	CLAIM WAS F	ROV									
IN FLORIDA, ANY	PERSC	ON WHO	KNOWIN	IGLY A	ND WITH INTI	ENT	TO INJURE, I	DEFRA	UD,	OR DECEIVE ANY	/ INSURER	FILE	S A STATEME	ENT OF	CLAIM OR AN
APPLICATION CON	ITAININ	G ANY FA	LSE, INC	OMPLE	TE, OR MISLE	ADIN	IG INFORMATI	ON IS	GUIL	TY OF A FELONY O	OF THE THIR	D DE	GREE.		
IN KANSAS, ANY	PERSO	N WHO K	NOWING	AN AN		лт ти	O DEFRAUD	PRESE	NTS	CAUSES TO BE F	PRESENTED) OR	PREPARES V	итн ки	
BELIEF THAT IT W															
OR IN SUPPORT (
CLAIM FOR PAYM															
										; OR CONCEALS,	FOR THE P	URP	USE OF MISL	EADING	6, INFORMATION
CONCERNING AN		WAIERIA	LIHERE	10 00		DUL	ENT INSURANO	JE AC	۱.						
IN MASSACHUSET	TTS, NE	BRASKA,	OREGO	N AND	VERMONT, A	NY I	PERSON WHO	KNO\	VING	LY AND WITH INT	ENT TO DE	FRA	JD ANY INSU	RANCE	COMPANY OR
ANOTHER PERSO	N FILES	AN APP	LICATIO	N FOR I	INSURANCE O	R ST	ATEMENT OF	CLAIN	1 CON	NTAINING ANY MA	TERIALLY F	ALSE	INFORMATIC	N, OR	CONCEALS FOR
THE PURPOSE OF								THER	ETO,	MAY BE COMMITT	ING A FRAU	DULE	NT INSURANC	CE ACT	, WHICH MAY BE
A CRIME AND MAY	SUBJE	CT THE P	ERSON	IO CRI	MINAL AND CI	/IL P	ENALTIES.								

IN WASHINGTON, IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.