



**BYARS | WRIGHT**  
INSURANCE SINCE 1946

## Application Information

Name of Corporation(s) \_\_\_\_\_

Name Primary Contact \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email for primary contact \_\_\_\_\_

Fed Id # \_\_\_\_\_ Effective date of policy \_\_\_\_\_

Hours of operation \_\_\_\_\_

Total Payroll - per code, per year

Code	Year	Payroll Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### Location 1

Address \_\_\_\_\_

Contents limit of policy \_\_\_\_\_ (Referred to as BPP in the policy.)

Building is \_\_\_\_\_ own or \_\_\_\_\_ lease

Year building was built \_\_\_\_\_ (If unknown, please give approximated year.)

Square footage \_\_\_\_\_

Sales at location \_\_\_\_\_ (annual or average weekly)

Alcohol sales at location if any \_\_\_\_\_ (annual or average weekly)

Number of employees at location \_\_\_\_\_

Security measures: \_\_\_\_\_ alarm system; if so, is a fire alarm tied in \_\_\_\_\_

\_\_\_\_\_ camera system

Age of roof at location \_\_\_\_\_

Please describe any remodeling or updating you have completed in the last 15 years, include the year if possible?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(for example: new roof, re-wiring of store or new panel boxes installed, new equipment installed, new transformers or wiring updated on the outside, etc.)

List all loss prevention procedures \_\_\_\_\_

\_\_\_\_\_ (RTW, Sweep logs, training, etc.)

**Location 2**

Address \_\_\_\_\_

Contents limit of policy \_\_\_\_\_ (Referred to as BPP in the policy.)

Building is \_\_\_\_\_ own or \_\_\_\_\_ lease

Year building was built \_\_\_\_\_ (If unknown, please give approximated year.)

Square footage \_\_\_\_\_

Sales at location \_\_\_\_\_ (annual or average weekly)

Alcohol sales at location if any \_\_\_\_\_ (annual or average weekly)

Number of employees at location \_\_\_\_\_

Security measures: \_\_\_\_\_ alarm system; if so, is a fire alarm tied in \_\_\_\_\_  
\_\_\_\_\_ camera system

Age of roof at location \_\_\_\_\_

Please describe any remodeling or updating you have completed in the last 15 years, include the year if possible?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(for example: new roof, re-wiring of store or new panel boxes installed, new equipment installed, new transformers or wiring updated on the outside, etc.)

List all loss prevention procedures \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_ (RTW, Sweep logs, training, etc.)

**Location 3**

Address \_\_\_\_\_

Contents limit of policy \_\_\_\_\_ (Referred to as BPP in the policy.)

Building is \_\_\_\_\_ own or \_\_\_\_\_ lease

Year building was built \_\_\_\_\_ (If unknown, please give approximated year.)

Square footage \_\_\_\_\_

Sales at location \_\_\_\_\_ (annual or average weekly)

Alcohol sales at location if any \_\_\_\_\_ (annual or average weekly)

Number of employees at location \_\_\_\_\_

Security measures: \_\_\_\_\_ alarm system; if so, is a fire alarm tied in \_\_\_\_\_  
\_\_\_\_\_ camera system

Age of roof at location \_\_\_\_\_

Please describe any remodeling or updating you have completed in the last 15 years, include the year if possible?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(for example: new roof, re-wiring of store or new panel boxes installed, new equipment installed, new transformers or wiring updated on the outside, etc.)

List all loss prevention procedures \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_ (RTW, Sweep logs, training, etc.)

*Use extra pages as needed for additional locations*