

# BC Commercial Insurance Services

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Named Insured: \_\_\_\_\_

Location #1: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_



Location #2: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX \_\_\_\_\_ E-mail \_\_\_\_\_

## Description of Primary Business Operations (Select ONE):

- Auto Body Repair & Paint Shop
- Auto Parts: Retail Only
- Auto Parts: Distributor/Mfg/Rebuilder
- Brake and Wheel Alignment Shop
- Diagnostic Centers/Smog Test
- General Auto Repair
- Muffler Shop
- Radiator Repair
- Tire Sales, Installation and Ignition
- Transmission Shop
- Tune-Up Specialists
- Other:

## Underwriting Concerns: (Check all that apply):

- Also a convenience store
- Also gasoline sales
- AAA Approved\* 
- ASE Blue Shield or I-CAR certified\* 
- Antique or Classic vehicles \_\_\_\_%
- NO Split rim work or tire recapping/retreading
- NO Performance customization or conversions
- NO Contract-for-hire Towing
- NO Trucks over 20,000 GVW
- NO Autos held For Sale.
- NO "Loaner" vehicles or renting/leasing
- NO Dog on premises

Years in Business: \_\_\_\_\_ # of Employees: \_\_\_\_\_ FEIN# \_\_\_\_\_ Incorporated: Yes / No

Any other businesses or subsidiaries? Yes / No • Bankruptcy or cancellation in last 5 years? Yes / No

## PRIOR INSURANCE

Current Insurance Company? \_\_\_\_\_ Policy # \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Current Premium: \$ \_\_\_\_\_ Any claims? Yes / No

## PROPERTY

Building: Owned / Leased • Building Limit (amount that the building is insured for): \$ \_\_\_\_\_

Business Personal Property Limit: \$ \_\_\_\_\_ Business Income Limit: \$ \_\_\_\_\_ Deductible: \$ \_\_\_\_\_

Construction: (1) Frame (2) Masonry, wood roof (3) Metal walls & roof (4) Masonry, metal roof (5) 60 Min rated (6) 120 Min

Square Feet: \_\_\_\_\_ • Year Built: \_\_\_\_\_ • Updates: Roof \_\_\_\_\_ Electrical & Plumbing \_\_\_\_\_ • Sprinklers: Yes / No

Alarm with Monitoring Service: Fire / Burglar / None • Security Cameras: Yes / No • Any company vehicles? Yes / No

## GARAGE LIABILITY

Premises Liability Limit, per occurrence:  \$1,000,000  \$2,000,000

Garage Keepers Limit:  \$30,000  \$60,000  \$100,000  \$300,000  \$600,000  \$ \_\_\_\_\_

Employee Tools Limit:  \$5,000  \$10,000  \$ \_\_\_\_\_

Estimated Total Gross Sales: \$ \_\_\_\_\_ Retail Sales of Parts Only (\$ or %) \_\_\_\_\_

Do all drivers have a clean driving record? (no more than 1-2 violations) Yes / No

Retirement Plan? Yes / No • Health Plan? Yes / No • Umbrella: \$ \_\_\_\_\_ \*BC is not affiliated with AAA, ASE, or I-Car.

## WORKERS COMP

Current WC Insurance Company: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Premium: \_\_\_\_\_

Policy # \_\_\_\_\_ Any claims? Yes / No • Experience Mod: \_\_\_\_\_ • Health Plan? Yes / No

Owners/Officers Names: \_\_\_\_\_ Exclude? Yes / No

Location #	class code	description	# full time employees	# part time employees	annual payroll