

Commercial Small Account Quote Sheet

(This is not an application. Please use for quotes only.)

JAEGER + HAINES, INC.

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Agency: _____ Phone: _____ Need by Date: _____

Contact: _____ Fax: _____ E-mail: _____

GENERAL INFORMATION

Applicant Name: _____ Phone: _____

Location of Risk: Street: _____ City: _____ State: _____

Description of Operations: _____

Years in Business or Years Experience: _____

Prior Property Carrier: _____ Exp. Date: _____

Amount of Current Property Coverage: _____

Losses: _____

Do you know the insured and can you recommend? _____

COMMENTS: _____

PROPERTY COVERAGE

Subject of Insurance	Amount	Coins%	Valuation	Causes of Loss	Deductible
_____	\$ _____	_____	_____	_____	_____
_____	\$ _____	_____	_____	_____	_____
_____	\$ _____	_____	_____	_____	_____
_____	\$ _____	_____	_____	_____	_____

Theft Coverage: Yes ___ No ___

Construction Type: _____ Prot Cl: _____ # Stories _____ Yr. Built: _____ Total Area: _____

Building Updates(Yr): Wiring _____ Roofing _____ Plumbing _____ Heating _____ Other _____

Central Station Burglar Alarm: Yes ___ No ___ Wireless Backup: Yes ___ No ___

Automatic Fire Extinguishing System over Cooking areas: Yes ___ No ___

LIABILITY COVERAGE

General Aggregate	\$ _____	PREMIUM BASIS:
Products & Completed Operations Aggregate	\$ _____	() Area _____
Each Occurrence	\$ _____	() Payroll \$ _____
Personal & Advertising Injury	\$ _____	() Units _____
Damage to Premises Rented to You	\$ _____	() Sales \$ _____
Medical (Any One Person)	\$ _____	() Gallons _____