



KwikRisk® Application

Equipment & Contents

Insured/Property Information

Name of Insured	Effective Date	Term Desired		
		3 Months	6 Months	1 Year
Name of Insured Address				
Property Address				
How did you hear about PFI?		Explain:		

Description of Contents or Equipment*

* Please attach inventory list with separate dollar amounts per item if available. Provide serial numbers if applicable.

Is the equipment mobile? If so, how often is it moved and in what manner (i.e. trailer, etc.) *NOTE: Inventory coverage is only available for repossessed inventory.*
 Yes No

Amount of insurance/loan:	Estimated ACV of Equipment/Contents
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Location Information

Is the building where the equipment/contents are located occupied or vacant?	Is the borrower still using equipment/contents?		
Construction of Building	Square Footage		
Describe Area of Location (Commercial or Residential)	Are regular checks made to the premises? Yes No		
Protective Safeguards: Central Station Fire Alarm Yes No	Central Station Burglar Alarm Yes No	Protection Class Code of Property	
Operational Sprinklers? Yes No	Fencing? Yes No	Any Losses?	
Status of Loan Force-Placed In Foreclosure Repossessed Other (explain)			
Intentions for the Equipment			

STATEMENT: Any person who knowingly and with intent to defraud any insurance company or another person, who files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties. This application becomes a part of the insurance policy if bound. I have read and fully understand the above information, as well as answered the questions to the best of my knowledge.

NOTE: If you are an individual or private investor seeking insurance coverage, you will need to work with a licensed P&C agent in the state where the property is located in order for PFI to provide an insurance quote. Please indicate at the top of the KwikRisk application your licensed insurance representative. If you do not have an agent, please indicate this on the form and we will provide a list of licensed agents in your area.

Authorized Client Signature (Required)

Date

Signed application required for coverage to be bound.