

**APPLICATION FOR COMMERCIAL LINES GENERAL LIABILITY**

When completing this form, write in separate case.

Applicant \_\_\_\_\_ Date \_\_\_\_\_  
Name MI Paternal Last Name Maternal Last Name mm/dd/yyyy

Business Name \_\_\_\_\_ Other Name Used \_\_\_\_\_

Postal address \_\_\_\_\_  
PO Box Development, Sector or Ward Number Street HC/RR Box  
 \_\_\_\_\_  
City State Zip Code

Phone No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cellular No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Customer E-Mail \_\_\_\_\_

New Business  Renewal  Effective date: From \_\_\_\_\_ to \_\_\_\_\_  
mm/dd/yyyy mm/dd/yyyy

Type of Business:  Individual Date of Birth \_\_\_\_\_  
mm/dd/yyyy  
 Partnership  Association  Joint Venture  Corporation  Other

Type of Risk:  Apartment  Contractor  Mercantile  Office  
 Service  Industrial & Processing  Institutional  Motel/Hotel

Insured's Operations:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Liability Coverage Information**

→ **Limits of Insurance**

Products/ Completed Operations Aggregate Limit \_\_\_\_\_  
 Per Occurrence Limit \_\_\_\_\_  
 Personal & Advertising Injury Limit \_\_\_\_\_  
 Fire Damage Limit (any one fire) \_\_\_\_\_  
 Medical Expenses Limit (any one person) \_\_\_\_\_

→ **Premium Base**

Annual Sales \_\_\_\_\_  Annual Payroll \_\_\_\_\_  
 No. of Employees \_\_\_\_\_

→ **Optional Coverage**

Hired & Nonowned Auto – Limit 100 / 300 / 50

→ **Loss History**

There has not been nor is there now pending any claim(s) against any person/corporation proposed for insurance of the name applicant?

If yes, please provide complete details.

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**NOTICE:** "Any person who knowingly and with the intention to defraud presents false information in an insurance application or who presents, assists or allows to present a fraudulent claim for the payment of a loss or other benefits, or presents more than one claim for the same damage or loss, will incur in a felony and, if convicted, shall be sanctioned for each violation with a fine of no less than five thousand dollars (\$5,000.00) and no greater than ten thousand dollars (\$10,000.00) or a fixed prison term of three (3) years, or both penalties. If aggravating circumstances are present, the fixed prison term could be raised to a maximum of five (5) years; if attenuating circumstances are present, the fixed prison term could be lowered to a minimum of two (2) years." Law #18 January 8, 2004.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Producer: \_\_\_\_\_ Code: \_\_\_\_\_

Producer Name: \_\_\_\_\_ Date: \_\_\_\_\_