

**Application for Corporate Fine Art
and Collectables Insurance**

Atlantic Marine Underwriters Inc

*Atlantic Marine Underwriters Inc., Atlantic House, 223 Kent Street West, Lindsay, Ontario K9V 2Z1
Tel: (705) 878- 9014 Fax: (705) 878-4387 www.atlanticmarine.net*

1. General Information

- a. Name and Address of Applicant: _____

- b. Other Locations to be Included:

Number/Name/Street	City/Town	Province	Post Code	Country

- c. Nature of Insured's Business: _____
- d. Person to Contact (if different from the Applicant): _____

2. Insurance Period

From which date would you wish twelve months insurance to attach? _____

3. Buildings Construction and Security

- a. Please state the building type and construction of each Location e.g. House, Apartment, Office etc. Built of Brick, Wood Frame, Concrete etc. Please use extra sheets of paper if required.
- b. What Protective Devices or Systems are in use? e.g. Guards, Central Station Alarm, Security Alarm, Fire Alarm, Safe etc.
- c. Is any of the insured property kept in areas open to general public access, if so please provide details e.g. Foyer, customer service areas etc. and values.
- d. Has a Security Survey been carried out on all or any of the locations? If so, please attach details.

4. Coverage's

- a. Coverage limit required per Location. _____

TOTAL _____

- b. Is any of the Collection to be exhibited? If so what, where and when? What security arrangements will be in place? _____

- c. Is any of the collection to be kept permanently outside? e.g. Statues, Garden Ornaments, Machinery, etc. If so please specify what and where. _____
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5. *Schedule of Property*

- a. Please provide a detailed description of each item that you wish to insure on an agreed value basis. Values should be supported by the attachment of copies of all available Appraisals, Bills of Sale or other evidence of true value.

Description	Purchase/Appraisal Date	Amount of Insurance
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(Should further space be required, please use separate piece of paper)

- b. What further coverage limits are required for items not scheduled above?

1. Fine Arts
2. Jewellery
3. Silverware
4. Coins
5. Stamps
6. Books
7. Furs
8. Musical Instruments
- 9.
- 10.

6. *History*

- a. Have any losses been suffered or claims been made during the last 3 years? If so, please give details. _____
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- b. Have any losses been suffered or claims been made greater than \$20,000 or equivalent in other currencies? If so please give details. _____
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- c. Have you ever had previous insurance cancelled by a previous insurer? _____
- d. Current Insurer: _____ Current Premium: _____ Target: _____

Applicants Statement:

The Applicant warrants to the best of their knowledge and belief that the statements set forth herein are true and include all material information. The Applicant further warrants that if the information supplied on this application changes between the date of this application and the inception date of the policy, the Applicant will immediately notify Underwriters of such change. Signing this application does not bind the Underwriters to offer nor the Applicant to accept insurance, but it is agreed that this application shall be the basis of the insurance and will be attached and made part of the policy should the policy be issued.

Date _____

Applicant Signature _____