AGENCY CUSTOMER ID: _____

BUSINESS INCOME / EXTRA EXPENSE / RENTAL VALUE
SUPPLEMENT TO PROPERTY SECTION

DATE (MM/DD/YYYY)

AGENCY	CARRIER	NAIC CODE

POLICY NUMBER	EFFECTIVE DATE	APPLICANT / FIRST NAMED INSURED

PREMISES INFORMATION

PREMISES #:
BUILDING #:

☐ BUSINESS INCOME / EXTRA EXPENSE ☐ BUSINESS INCOME W/O EXTRA EXPENSE ☐ EXTRA EXPENSE ☐ BUSINESS INCOME / RENTAL VALUE ☐ RENTAL VALUE

TYPE OF BUSINESS
☐ NON MFG
☐ MFG
☐ MINING
_____ % COINS

ORDINARY PAYROLL
☐ EXCL ☐ INCL
☐ 90 DAYS
☐ 180 DAYS
☐ _____
☐ $ _____

☐ **EXT PERIOD** _____ DAYS

☐ **MO PERIOD** _____ LIMIT

☐ **MAX PERIOD**

☐ **POWER/HEAT** $ _____ DED

☐ **ELEC MEDIA** _____ DAYS

☐ **ORD OR LAW** _____ DAYS

☐ **CIVIL AUTH** _____ DAYS

☐ **OFF PREM POWER**
☐ POWER
☐ WATER
☐ COMM (DESCR BELOW)

☐ **TUITION FEES**
$ _____ STUDENTS
$ _____ OTHER ED SERV/INC

☐ **DEPEND PROP**
☐ BROAD FORM ☐ LIMITED FORM
☐ _____
COIN _____ %
☐ CONT LOC ☐ MFG LOC
☐ REC LOC ☐ LDR LOC (DESC BELOW)

EXTRA EXPENSE
_____ DAYS PERIOD REST

LIMIT LOSS PAY
_____% _____%
_____% _____%

NAME(S) AND ADDRESS(ES) FOR OFF PREM POWER OR DEPEND PROP

OTHER COVERAGES

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AGENCY CUSTOMER ID: _____

ADDITIONAL PREMISES INFORMATION

PREMISES #: / BUILDING #:	☐ BUSINESS INCOME / EXTRA EXPENSE	☐ BUSINESS INCOME W/O EXTRA EXPENSE	☐ EXTRA EXPENSE	☐ BUSINESS INCOME / RENTAL VALUE	☐ RENTAL VALUE

TYPE OF BUSINESS
☐ NON MFG
☐ MFG
☐ MINING
_____ % COINS

ORDINARY PAYROLL
☐ EXCL ☐ INCL
☐ 90 DAYS
☐ 180 DAYS
☐ _____
☐ $ _____

☐ **EXT PERIOD** _____ DAYS

☐ **MO PERIOD** _____ LIMIT

☐ **MAX PERIOD**

☐ **POWER/HEAT** $ _____ DED

☐ **ELEC MEDIA** _____ DAYS

☐ **ORD OR LAW** _____ DAYS

☐ **CIVIL AUTH** _____ DAYS

☐ **OFF PREM POWER**
☐ POWER
☐ WATER
☐ COMM (DESCR BELOW)

☐ **TUITION FEES**
$ _____ STUDENTS
$ _____ OTHER ED SERV/INC

☐ **DEPEND PROP**
☐ BROAD FORM ☐ LIMITED FORM
☐ _____
COIN _____ %
☐ CONT LOC ☐ MFG LOC
☐ REC LOC ☐ LDR LOC (DESC BELOW)

EXTRA EXPENSE
_____ DAYS PERIOD REST

LIMIT LOSS PAY
_____% _____%
_____% _____%

NAME(S) AND ADDRESS(ES) FOR OFF PREM POWER OR DEPEND PROP

OTHER COVERAGES

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON 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 [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, DC, FL, HI, KS, MA, MN, NE, OH, OK, OR, VT or WA; in LA, ME, TN and VA, insurance benefits may also be denied)
IN THE DISTRICT OF COLUMBIA, WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS, IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT

IN FLORIDA, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

IN KANSAS, ANY PERSON WHO, KNOWINGLY AND WITH INTENT TO DEFRAUD, PRESENTS, CAUSES TO BE PRESENTED OR PREPARES WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, PURPORTED INSURER, BROKER OR ANY AGENT THEREOF, ANY WRITTEN STATEMENT AS PART OF, OR IN SUPPORT OF, AN APPLICATION FOR THE ISSUANCE OF, OR THE RATING OF AN INSURANCE POLICY FOR PERSONAL OR COMMERCIAL INSURANCE, OR A CLAIM FOR PAYMENT OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY FOR COMMERCIAL OR PERSONAL INSURANCE WHICH SUCH PERSON KNOWS TO CONTAIN MATERIALLY FALSE INFORMATION CONCERNING ANY FACT MATERIAL THERETO; OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT.

IN MASSACHUSETTS, NEBRASKA, OREGON AND VERMONT, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON 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, MAY BE COMMITTING A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME AND MAY SUBJECT THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

IN WASHINGTON, IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.