



GUILD INSURANCE

AGENCY INC

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ILLINOIS VACANT BUILDING PROGRAM APPLICATION

APPLICANT

NAMED INSURED:
DBA:
ADDRESS 1:
ADDRESS 2:
CITY STATE, ZIP
INSPECTION CONTACT/PHONE NUMBER:

EFFECTIVE DATE _____ QUOTE ISSUE

COVERAGE DESIRED

PROPERTY
 GENERAL LIABILITY
 BUILDER'S RISK

POLICY TERM

3-MONTH
 6-MONTH
 12-MONTH

PREMISES INFORMATION

LOCATION #1 ADDRESS	LOCATION #2 ADDRESS	LOCATION #3 ADDRESS
\$	\$	\$

GENERAL INFORMATION

YEAR OF PROPERTY PURCHASE?	HOW LONG IS THE BUILDING INTENDED TO BE VACANT?
WHAT YEAR WAS THE BUILDING BUILT?	IS THERE A SWIMMING POOL ON PREMISES?
INSIDE OR OUTSIDE CITY LIMITS?	IS THE BUILDING SECURED FROM UNAUTHORIZED ENTRY?
ANY COVERAGE CANCELLED IN LAST 3 YEARS?	IS THE PROPERTY AWAITING DEMOLITION?
HOW LONG HAS BUILDING BEEN VACANT?	ANY EXPOSURE TO FLAMMABLES/CHEMICALS?

REMARKS:

PLANS FOR THE BUILDING:

IS THE BUILDING TO BE DEMOLISHED OR REMODELED? _____

IF YES, PLEASE ANSWER THE FOLLOWING: _____

DESCRIBE WORK TO BE DONE _____

EXPECTED START DATE: _____

EXPECTED COMPLETION DATE: _____

WHO IS PERFORMING THE WORK? _____

ARE CERTIFICATES OBTAINED FROM CONTRACTORS/SUB-CONTRACTORS? _____

IS A CONTRACT CONTAINING A HOLD-HARMLESS CLAUSE HOLDING THE APPLICANT HARMLESS OBTAINED FROM THE CONTRACTOR? _____

ESTIMATED COST FOR RENOVATION/CONSTRUCTION OPERATIONS:

DURING NEXT 12 MONTHS: _____

FOR ENTIRE PROJECT: _____

IF APPLICANT IS ACTING AS THE GENERAL CONTRACTOR:

DOES THE APPLICANT OBTAIN A WRITTEN CONTRACT FROM ALL SUB-CONTRACTORS WHICH INCLUDES A HOLD HARMLESS CLAUSE IN FAVOR OF THE APPLICANT? _____

IS THE APPLICANT NAMED AS ADDITIONAL INSURED ON THE SUBCONTRACTOR'S POLICY? _____

IS SCAFFOLDING OWNED, RENTED, OR ERECTED BY THE APPLICANT? _____

WILL THE APPLICANT OCCUPY THE BUILDING UPON COMPLETION? _____

FRAUD WARNING:

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER 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 SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

APPLICANT'S SIGNATURE: _____ DATE: _____

PRODUCER: _____ TEL: _____

FAX: _____