

## ACORD 152 (2015/06) - Commercial Inland Marine Section

ACORD 152, Commercial Inland Marine Section, is used to collect underwriting and rating information for equipment schedules and other inland marine classes that do not have an associated ACORD form.

This form was designed to be used in conjunction with ACORD 125, Commercial Insurance Application - Applicant Information Section. See the instructions for ACORD 125 for information on that form.

### Form Page 1

Section Name	Field Name	Description
IDENTIFICATION SECTION	Agency Customer ID	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
IDENTIFICATION SECTION	Date	Enter date: The date on which the form is completed. (MM/DD/YYYY)
IDENTIFICATION SECTION	Agency	Enter text: The full name of the producer / agency.
IDENTIFICATION SECTION	Policy Number	Enter identifier: The identifier assigned by the insurer to the policy, or submission, being referenced exactly as it appears on the policy, including prefix and suffix symbols. If required for self-insurance, the self-insured license or contract number.
IDENTIFICATION SECTION	Effective Date	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence. (MM/DD/YYYY)
IDENTIFICATION SECTION	Carrier	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
IDENTIFICATION SECTION	NAIC Code	Enter code: The identification code assigned to the insurer by the National Association of Insurance Commissioners (NAIC).
IDENTIFICATION SECTION	Applicant / First Named Insured	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
SUMMARY INFORMATION	Loc #	Enter number: The location number for the premises.
SUMMARY INFORMATION	Bld #	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
SUMMARY INFORMATION	Class Code	Enter code: The code defining the class (group) of the inland marine items being described.
SUMMARY INFORMATION	Subclass Code	Enter code: The code that further defines the class (group) of the inland marine items being described.
SUMMARY INFORMATION	Description	Enter text: The description of the property class / grouping to be covered.
SUMMARY INFORMATION	Sch Y / N	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the property is scheduled.

<b>SUMMARY INFORMATION</b>	<b>Num Items</b>	Enter number: The number of items to which the coverage applies.
<b>SUMMARY INFORMATION</b>	<b>Valuation</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim. If other valuation basis applies, provide necessary information.  Example valuation methods are:  A - Actual Cash Value R - Replacement Cost V - Agreed Amount M - Market Value
<b>SUMMARY INFORMATION</b>	<b>Blkt #</b>	Enter number: The identifying number for the blanket.
<b>SUMMARY INFORMATION</b>	<b>Max Item Value</b>	Enter amount: The maximum value of a single item within the class / grouping.
<b>SUMMARY INFORMATION</b>	<b>% Coins</b>	Enter percentage: The coinsurance percent at which the rate is published. Also, the amount of property value insured (as a percent). It can also represent the least amount of insurance the insured must carry on the property protected by the policy.
<b>SUMMARY INFORMATION</b>	<b>Loc #</b>	Enter number: The location number for the premises.
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<b>COVERAGES / CAUSES OF LOSS</b>	<b>Sch #</b>	Enter number: The schedule number associated with the Summary for the Inland Marine Class / Subclass.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Pol Lvl Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if coverage applies to the policy.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Cov Code</b>	Enter code: The code associated with the type of coverage being requested.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Description</b>	Enter text: The description of the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Limit</b>	Enter amount: The first limit associated with the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Limit Applies To</b>	Enter code: The code identifying what the first limit applies to.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Limit</b>	Enter amount: The second limit associated with the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Limit Applies To</b>	Enter code: The code identifying what the second limit applies to.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Ded</b>	Enter amount: The deductible amount associated with the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Ded Type</b>	Enter code: Enter code: The type of deductible (e.g., FL - Flat, P - Percent, etc.)



<b>COVERAGES / CAUSES OF LOSS</b>	<b>Opt Code</b>	Enter code: The code for an option applicable to the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>% Coinsurance</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Premium</b>	Enter amount: The premium for the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Sch #</b>	Enter number: The schedule number associated with the Summary for the Inland Marine Class / Subclass.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Pol Lvl Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if coverage applies to the policy.
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<b>COVERAGES / CAUSES OF LOSS</b>	<b>Premium</b>	Enter amount: The premium for the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Sch #</b>	Enter number: The schedule number associated with the Summary for the Inland Marine Class / Subclass.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Pol Lvl Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if coverage applies to the policy.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Cov Code</b>	Enter code: The code associated with the type of coverage being requested.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Description</b>	Enter text: The description of the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Limit</b>	Enter amount: The first limit associated with the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Limit Applies To</b>	Enter code: The code identifying what the first limit applies to.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Limit</b>	Enter amount: The second limit associated with the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Limit Applies To</b>	Enter code: The code identifying what the second limit applies to.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Ded</b>	Enter amount: The deductible amount associated with the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Ded Type</b>	Enter code: Enter code: The type of deductible (e.g., FL - Flat, P - Percent, etc.)
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Opt Code</b>	Enter code: The code for an option applicable to the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>% Coinsurance</b>	Enter percentage: The coinsurance percent used at the time of loss.
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<b>COVERAGES / CAUSES OF LOSS</b>	<b>Limit Applies To</b>	Enter code: The code identifying what the second limit applies to.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Ded</b>	Enter amount: The deductible amount associated with the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Ded Type</b>	Enter code: Enter code: The type of deductible (e.g., FL - Flat, P - Percent, etc.)
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Opt Code</b>	Enter code: The code for an option applicable to the coverage.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>% Coinsurance</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>COVERAGES / CAUSES OF LOSS</b>	<b>Premium</b>	Enter amount: The premium for the coverage.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.

<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
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<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).



<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.

<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).

<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.
<b>EQUIPMENT STORAGE</b>	<b>Loc #</b>	Enter number: The location number for the premises.
<b>EQUIPMENT STORAGE</b>	<b>Bld #</b>	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
<b>EQUIPMENT STORAGE</b>	<b>Num Mos</b>	Enter number: The number of months the equipment is kept in storage. (If less than one month, enter one. All partial months should be rounded up).
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Inside</b>	Enter amount: The maximum value of the items stored inside a building.
<b>EQUIPMENT STORAGE</b>	<b>Maximum Value Outside</b>	Enter amount: The maximum value of all items stored outside.
<b>EQUIPMENT STORAGE</b>	<b>Type of Security</b>	Enter text: The brief description of the kind of security employed by the applicant at each location. Specify guards, alarms, fences, dogs, etc.

**Form Page 2**

<b>Section Name</b>	<b>Field Name</b>	<b>Description</b>
<b>IDENTIFICATION SECTION</b>	<b>Agency Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>GENERAL INFORMATION - EQUIPMENT</b>	<b>1. Equipment rented, loaned to others with or without operators? Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Equipment rented, loaned to others, with / without operators?"
<b>GENERAL INFORMATION - EQUIPMENT</b>	<b>Explanation</b>	Enter text: If the applicant is involved in any sort of rental or loan agreement, explain the circumstances and the nature of the agreement, including who is carrying the insurance for the equipment.
<b>GENERAL INFORMATION - EQUIPMENT</b>	<b>2. Equipment rented, loaned from others with or without operators? Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Equipment rented, loaned from others with / without operators?"
<b>GENERAL INFORMATION - EQUIPMENT</b>	<b>Explanation</b>	Enter text: If the applicant is involved in any sort of rental or loan agreement, explain the circumstances and the nature of the agreement, including who is carrying the insurance for the equipment.
<b>GENERAL INFORMATION - EQUIPMENT</b>	<b>3. Is applicant operating equipment that is not listed here? Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Is applicant operating equipment not listed here?"

<b>ADDITIONAL INTEREST / CERTIFICATE RECIPIENTS</b>	<b>Explanation</b>	Enter text: An explanation of any applicant operating equipment not listed.
<b>GENERAL INFORMATION - EQUIPMENT</b>	<b>4. Property used underground? Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Property used underground?".
<b>GENERAL INFORMATION - EQUIPMENT</b>	<b>Explanation</b>	Enter text: Indicate if any work is done underground and if equipment is left underground. Explain all circumstances of underground operations.
<b>GENERAL INFORMATION - EQUIPMENT</b>	<b>4. Any work done afloat? Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any work done afloat?".
<b>GENERAL INFORMATION - EQUIPMENT</b>	<b>Explanation</b>	Enter text: An explanation of any work done afloat. Indicate if any work is done on bodies of water and if equipment is left afloat unattended for extended periods. Explain circumstances and indicate which bodies of water are involved.
<b>ADDITIONAL INTEREST</b>	<b>ACORD 45 Attached (checkbox)</b>	Check the box (if applicable): Indicates an ACORD 45, Additional Interest Schedule is attached.
<b>ADDITIONAL INTEREST</b>	<b>Lender's Loss Payable (checkbox) - One</b>	Check the box (if applicable): Indicates the additional interest type is a lender's loss payable.
<b>ADDITIONAL INTEREST</b>	<b>Lienholder (checkbox) - One</b>	Check the box (if applicable): Indicates the additional interest type is a lien holder.
<b>ADDITIONAL INTEREST</b>	<b>Interest Loss Payee (checkbox) - One</b>	Check the box (if applicable): Indicates the additional interest type is a loss payee.
<b>ADDITIONAL INTEREST</b>	<b>Other Interest (checkbox) - One</b>	Check the box (if applicable): Indicates the additional interest is other than those listed.
<b>ADDITIONAL INTEREST</b>	<b>Other Interest Description - One</b>	Enter text: The description of the other type of additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Reason for Interest - One</b>	Enter text: The description for the interest in the item.
<b>ADDITIONAL INTEREST</b>	<b>Rank - One</b>	Enter number: The ranking of 'this' additional interest when multiple additional interests are associated with the same item.
<b>ADDITIONAL INTEREST</b>	<b>Certificate - One</b>	Check the box (if applicable): Indicates if the additional interest requires a Certificate of Insurance.
<b>ADDITIONAL INTEREST</b>	<b>Policy - One</b>	Check the box (if applicable): Indicates the additional interest requires a copy of the policy.
<b>ADDITIONAL INTEREST</b>	<b>Send Bill - One</b>	Check the box (if applicable): Indicates the bill should be sent to the additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Name and Address - One</b>	Enter text: The additional interest's full name.
<b>ADDITIONAL INTEREST</b>		Enter text: The additional interest's mailing address line one.
<b>ADDITIONAL INTEREST</b>		Enter text: The additional interest's mailing address line two.

<b>ADDITIONAL INTEREST</b>		Enter text: The additional interest's mailing address city name.
<b>ADDITIONAL INTEREST</b>		Enter code: The additional interest's mailing address state or province code.
<b>ADDITIONAL INTEREST</b>		Enter code: The additional interest's mailing address postal code.
<b>ADDITIONAL INTEREST</b>		Enter code: The additional interest's country code.
<b>ADDITIONAL INTEREST</b>	<b>Reference / Loan # - One</b>	Enter identifier: The loan number, account number or other controlling number that the additional interest may have assigned the insured.
<b>ADDITIONAL INTEREST</b>	<b>Interest End Date - One</b>	Enter date: The date the interest holder's interest terminates.
<b>ADDITIONAL INTEREST</b>	<b>Lien Amount - One</b>	Enter amount: The amount of the loan.
<b>ADDITIONAL INTEREST</b>	<b>Phone - One</b>	Enter number: The primary phone number of the additional interest.
<b>ADDITIONAL INTEREST</b>	<b>E-Mail Address - One</b>	Enter text: The primary e-mail address for the additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Location - One</b>	Enter number: The producer assigned number of the location which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Building - One</b>	Enter number: The producer assigned number of the building which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Schedule Number - One</b>	Enter number: The producer assigned number of the scheduled item which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Item Number - One</b>	Enter number: The producer assigned number of the scheduled item which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Item Description - One</b>	Enter text: The description of the item of interest if needed to further clarify. For a vehicle, list the make, model and VIN number. For a scheduled item, list the description, such as three carat diamond in six point setting.
<b>ADDITIONAL INTEREST</b>	<b>Lender's Loss Payable (checkbox) - Two</b>	Check the box (if applicable): Indicates the additional interest type is a lender's loss payable.
<b>ADDITIONAL INTEREST</b>	<b>Lienholder (checkbox) - Two</b>	Check the box (if applicable): Indicates the additional interest type is a lien holder.
<b>ADDITIONAL INTEREST</b>	<b>Interest Loss Payee (checkbox) - Two</b>	Check the box (if applicable): Indicates the additional interest type is a loss payee.
<b>ADDITIONAL INTEREST</b>	<b>Other Interest (checkbox) - Two</b>	Check the box (if applicable): Indicates the additional interest is other than those listed.
<b>ADDITIONAL INTEREST</b>	<b>Other Interest Description - Two</b>	Enter text: The description of the other type of additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Reason for Interest - Two</b>	Enter text: The description for the interest in the item.
<b>ADDITIONAL INTEREST</b>	<b>Rank - Two</b>	Enter number: The ranking of 'this' additional interest when multiple additional interests are associated with the same item.

<b>ADDITIONAL INTEREST</b>	<b>Certificate - Two</b>	Check the box (if applicable): Indicates if the additional interest requires a Certificate of Insurance.
<b>ADDITIONAL INTEREST</b>	<b>Policy - Two</b>	Check the box (if applicable): Indicates the additional interest requires a copy of the policy.
<b>ADDITIONAL INTEREST</b>	<b>Send Bill - Two</b>	Check the box (if applicable): Indicates the bill should be sent to the additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Name and Address - Two</b>	Enter text: The additional interest's full name.
<b>ADDITIONAL INTEREST</b>		Enter text: The additional interest's mailing address line one.
<b>ADDITIONAL INTEREST</b>		Enter text: The additional interest's mailing address line two.
<b>ADDITIONAL INTEREST</b>		Enter text: The additional interest's mailing address city name.
<b>ADDITIONAL INTEREST</b>		Enter code: The additional interest's mailing address state or province code.
<b>ADDITIONAL INTEREST</b>		Enter code: The additional interest's mailing address postal code.
<b>ADDITIONAL INTEREST</b>		Enter code: The additional interest's country code.
<b>ADDITIONAL INTEREST</b>	<b>Reference / Loan # - Two</b>	Enter identifier: The loan number, account number or other controlling number that the additional interest may have assigned the insured.
<b>ADDITIONAL INTEREST</b>	<b>Interest End Date - Two</b>	Enter date: The date the interest holder's interest terminates.
<b>ADDITIONAL INTEREST</b>	<b>Lien Amount - Two</b>	Enter amount: The amount of the loan.
<b>ADDITIONAL INTEREST</b>	<b>Phone - Two</b>	Enter number: The primary phone number of the additional interest.
<b>ADDITIONAL INTEREST</b>	<b>E-Mail Address - Two</b>	Enter text: The primary e-mail address for the additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Location - Two</b>	Enter number: The producer assigned number of the location which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Building - Two</b>	Enter number: The producer assigned number of the building which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Schedule Number - Two</b>	Enter number: The producer assigned number of the scheduled item which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Item Number - Two</b>	Enter number: The producer assigned number of the scheduled item which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Item Description - Two</b>	Enter text: The description of the item of interest if needed to further clarify. For a vehicle, list the make, model and VIN number. For a scheduled item, list the description, such as three carat diamond in six point setting.
<b>ADDITIONAL INTEREST</b>	<b>Lender's Loss Payable (checkbox) - Three</b>	Check the box (if applicable): Indicates the additional interest type is a lender's loss payable.
<b>ADDITIONAL INTEREST</b>	<b>Lienholder (checkbox) - Three</b>	Check the box (if applicable): Indicates the additional interest type is a lien holder.

<b>ADDITIONAL INTEREST</b>	<b>Interest Loss Payee (checkbox) - Three</b>	Check the box (if applicable): Indicates the additional interest type is a loss payee.
<b>ADDITIONAL INTEREST</b>	<b>Other Interest (checkbox) - Three</b>	Check the box (if applicable): Indicates the additional interest is other than those listed.
<b>ADDITIONAL INTEREST</b>	<b>Other Interest Description - Three</b>	Enter text: The description of the other type of additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Reason for Interest - Three</b>	Enter text: The description for the interest in the item.
<b>ADDITIONAL INTEREST</b>	<b>Rank - Three</b>	Enter number: The ranking of 'this' additional interest when multiple additional interests are associated with the same item.
<b>ADDITIONAL INTEREST</b>	<b>Certificate - Three</b>	Check the box (if applicable): Indicates if the additional interest requires a Certificate of Insurance.
<b>ADDITIONAL INTEREST</b>	<b>Policy - Three</b>	Check the box (if applicable): Indicates the additional interest requires a copy of the policy.
<b>ADDITIONAL INTEREST</b>	<b>Send Bill - Three</b>	Check the box (if applicable): Indicates the bill should be sent to the additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Name and Address - Three</b>	Enter text: The additional interest's full name.
<b>ADDITIONAL INTEREST</b>		Enter text: The additional interest's mailing address line one.
<b>ADDITIONAL INTEREST</b>		Enter text: The additional interest's mailing address line two.
<b>ADDITIONAL INTEREST</b>		Enter text: The additional interest's mailing address city name.
<b>ADDITIONAL INTEREST</b>		Enter code: The additional interest's mailing address state or province code.
<b>ADDITIONAL INTEREST</b>		Enter code: The additional interest's mailing address postal code.
<b>ADDITIONAL INTEREST</b>		Enter code: The additional interest's country code.
<b>ADDITIONAL INTEREST</b>	<b>Reference / Loan # - Three</b>	Enter identifier: The loan number, account number or other controlling number that the additional interest may have assigned the insured.
<b>ADDITIONAL INTEREST</b>	<b>Interest End Date - Three</b>	Enter date: The date the interest holder's interest terminates.
<b>ADDITIONAL INTEREST</b>	<b>Lien Amount - Three</b>	Enter amount: The amount of the loan.
<b>ADDITIONAL INTEREST</b>	<b>Phone - Three</b>	Enter number: The primary phone number of the additional interest.
<b>ADDITIONAL INTEREST</b>	<b>E-Mail Address - Three</b>	Enter text: The primary e-mail address for the additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Location - Three</b>	Enter number: The producer assigned number of the location which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Building - Three</b>	Enter number: The producer assigned number of the building which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Schedule Number - Three</b>	Enter number: The producer assigned number of the scheduled item which has an additional interest.

<b>ADDITIONAL INTEREST</b>	<b>Item Number - Three</b>	Enter number: The producer assigned number of the scheduled item which has an additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Item Description - Three</b>	Enter text: The description of the item of interest if needed to further clarify. For a vehicle, list the make, model and VIN number. For a scheduled item, list the description, such as three carat diamond in six point setting.
<b>REMARKS</b>	<b>Remarks</b>	Enter text: The general remarks associated with the commercial inland marine line of business. Use this section to provide any additional information required for underwriting or rating.

**Form Page 3**

<b>Section Name</b>	<b>Field Name</b>	<b>Description</b>
<b>IDENTIFICATION SECTION</b>	<b>Agency Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>SCHEDULED ITEMS</b>	<b>Sch # - One</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - One</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - One</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Bikt - One</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - One</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - One</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - One</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - One</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - One</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - One</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - One</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - One</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - One</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - One</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - One</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.



<b>SCHEDULED ITEMS</b>	<b>Capacity - One</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - One</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Two</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Two</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Two</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Blkt - Two</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Two</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Two</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Two</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Two</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Two</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Two</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Two</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Two</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Two</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Two</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Two</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Two</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Two</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Three</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Three</b>	Enter identifier: The producer assigned identifier for the item.

<b>SCHEDULED ITEMS</b>	<b>Description - Three</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Blkt - Three</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Three</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Three</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Three</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Three</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Three</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Three</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Three</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Three</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Three</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Three</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Three</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Three</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Three</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Four</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Four</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Four</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Blkt - Four</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Four</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Four</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Four</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Four</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).

<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Four</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Four</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Four</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Four</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Four</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Four</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Four</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Four</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Four</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Five</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Five</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Five</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Bikt - Five</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Five</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Five</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Five</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Five</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Five</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Five</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Five</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Five</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Five</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Five</b>	Enter year: The model year of the item.

<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Five</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Five</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Five</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Six</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Six</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Six</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Blkt - Six</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Six</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Six</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Six</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Six</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Six</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Six</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Six</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Six</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Six</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Six</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Six</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Six</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Six</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Seven</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.

<b>SCHEDULED ITEMS</b>	<b>Item # - Seven</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Seven</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Blkt - Seven</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Seven</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Seven</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Seven</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Seven</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Seven</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Seven</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Seven</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Seven</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Seven</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Seven</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Seven</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Seven</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Seven</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Eight</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Eight</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Eight</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Blkt - Eight</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Eight</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Eight</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Eight</b>	Enter date: The date on which the item described was last appraised

<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Eight</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Eight</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Eight</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Eight</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Eight</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Eight</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Eight</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Eight</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Eight</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Eight</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Nine</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Nine</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Nine</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Blkt - Nine</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Nine</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Nine</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Nine</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Nine</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Nine</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Nine</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Nine</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Nine</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Nine</b>	Enter text: The manufacturer's model name or number for the item.

<b>SCHEDULED ITEMS</b>	<b>Year - Nine</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Nine</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Nine</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Nine</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Nine</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Nine</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Nine</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Blkt - Nine</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Nine</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Nine</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Nine</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Nine</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Nine</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Nine</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Nine</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Nine</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Nine</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Nine</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Nine</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Nine</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Nine</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).

<b>SCHEDULED ITEMS</b>	<b>Sch # - Ten</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Ten</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Ten</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Blkt - Ten</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Ten</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Ten</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Ten</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Ten</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Ten</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Ten</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Ten</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Ten</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Ten</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Ten</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Ten</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Ten</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Ten</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Ten</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Ten</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Ten</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Blkt - Ten</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Ten</b>	Enter amount: The value of the item.



<b>SCHEDULED ITEMS</b>	<b>Valuation - Ten</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Ten</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Ten</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Ten</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Ten</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Ten</b>	Enter percentage: The coinsurance percent used at the time of loss.
<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Ten</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Ten</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Ten</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Ten</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Ten</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Ten</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).
<b>SCHEDULED ITEMS</b>	<b>Sch # - Eleven</b>	Enter number: The number associated with the Summary for the Inland Marine Class / Subclass.
<b>SCHEDULED ITEMS</b>	<b>Item # - Eleven</b>	Enter identifier: The producer assigned identifier for the item.
<b>SCHEDULED ITEMS</b>	<b>Description - Eleven</b>	Enter text: The description of the item.
<b>SCHEDULED ITEMS</b>	<b>Excl Bikt - Eleven</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the item is excluded from blanket coverage.
<b>SCHEDULED ITEMS</b>	<b>Item Value - Eleven</b>	Enter amount: The value of the item.
<b>SCHEDULED ITEMS</b>	<b>Valuation - Eleven</b>	Enter code: Indicate the method which will be used to determine the amount paid on a claim.
<b>SCHEDULED ITEMS</b>	<b>Valuation Date - Eleven</b>	Enter date: The date on which the item described was last appraised
<b>SCHEDULED ITEMS</b>	<b>Purchase Date - Eleven</b>	Enter date: The date the item was purchased, (MM/DD/YYYY).
<b>SCHEDULED ITEMS</b>	<b>Own / Lease - Eleven</b>	Enter code: A code indicating if the item is owned or leased.
<b>SCHEDULED ITEMS</b>	<b>New / Used - Eleven</b>	Enter code: A code indicating if the item was purchased new or used.
<b>SCHEDULED ITEMS</b>	<b>% Coins - Eleven</b>	Enter percentage: The coinsurance percent used at the time of loss.

<b>SCHEDULED ITEMS</b>	<b>Manufacturer - Eleven</b>	Enter text: The name of the manufacturer of the item.
<b>SCHEDULED ITEMS</b>	<b>Model - Eleven</b>	Enter text: The manufacturer's model name or number for the item.
<b>SCHEDULED ITEMS</b>	<b>Year - Eleven</b>	Enter year: The model year of the item.
<b>SCHEDULED ITEMS</b>	<b>ID # / Serial # - Eleven</b>	Enter identifier: The identification number, serial number, or any other identifying symbol of the item.
<b>SCHEDULED ITEMS</b>	<b>Capacity - Eleven</b>	Enter number: The quantity or volume of the item. Indicate the unit of capacity, (e.g., tons, square feet, etc.)
<b>SCHEDULED ITEMS</b>	<b>Amount of Insurance - Eleven</b>	Enter limit: The amount of insurance representing the liability limit for the particular described equipment. The limit should reflect any required coinsurance percentage and the requested basis of valuation (ACV or Replacement Cost).

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<b>Section Name</b>	<b>Field Name</b>	<b>Description</b>
<b>IDENTIFICATION SECTION</b>	<b>Agency Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>SIGNATURE</b>	<b>Producer's Signature</b>	Sign here: Accommodates the signature of the authorized representative (e.g., producer, agent, broker, etc.) of the company(ies) listed on the document. This is required in most states.
<b>SIGNATURE</b>	<b>Producer's Name (Please Print)</b>	Enter text: The name of the authorized representative of the producer, agency and/or broker that signed the form.
<b>SIGNATURE</b>	<b>State Producer License No (Required in FL)</b>	Enter identifier: The State License Number of the producer.
<b>SIGNATURE</b>	<b>Applicant's Signature</b>	Sign here: Accommodates the signature of the applicant or named insured.
<b>SIGNATURE</b>	<b>Date</b>	Enter date: The date the form was signed by the applicant or named insured. (MM/DD/YYYY)
<b>SIGNATURE</b>	<b>National Producer Number</b>	Enter identifier: The National Producer Number (NPN) as defined in the National Insurance Producer Registry (NIPR). Note: The NPN is not the same as the producer state license number.