

ACORD 823 (2015/12) - Additional Premises Information Schedule

ACORD 823, Additional Premises Information Schedule, is used as an attachment to ACORD 125, Commercial Insurance Application, when more space is required for additional premises.

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	Page #	Enter number: The page number applicable to this page.
IDENTIFICATION SECTION	Of # of Pages	Enter number: The total number of pages applicable to this form (e.g., Page 1 of 4). If only one page, indicate Page 1 of 1.
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	Named Insured(s)	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
PREMISES INFORMATION	Loc # - One	Enter number: The location number for the premises.
PREMISES INFORMATION	Bld # - One	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
PREMISES INFORMATION	Address Line 1 - One	Enter text: The first address line of the commercial structure.
PREMISES INFORMATION	Address Line 2 - One	Enter text: The second address line of the commercial structure.
PREMISES INFORMATION	City - One	Enter text: The city of the commercial structure.
PREMISES INFORMATION	County - One	Enter text: The county of the commercial structure.
PREMISES INFORMATION	State - One	Enter code: The state or province code of the commercial structure.

PREMISES INFORMATION	Zip - One	Enter code: The postal code of the commercial structure.
PREMISES INFORMATION	City Limits Inside - One	Check the box (if applicable): Indicates the building is within the city limits.
PREMISES INFORMATION	City Limits Outside - One	Check the box (if applicable): Indicates the building is outside the city limits.
PREMISES INFORMATION	City Limits Other - One	Check the box (if applicable): Indicates the building is not inside nor outside city limits. For example, unincorporated.
PREMISES INFORMATION	Other City Limits Description - One	Enter text: The description of the risk location if not inside nor outside the city limits.
PREMISES INFORMATION	Interest Owner - One	Check the box (if applicable): Indicates the named insured's interest in the building is as its owner.
PREMISES INFORMATION	Interest Tenant - One	Check the box (if applicable): Indicates the named insured's interest in the building is as its tenant.
PREMISES INFORMATION	Other Interest - One	Check the box (if applicable): Indicates the named insured's interest in the building is other than those listed.
PREMISES INFORMATION	Other Interest Description - One	Enter text: The description of the insured's interest in the building when it is other than those listed.
PREMISES INFORMATION	# Full Time Employees - One	Enter number: The number of full time employees.
PREMISES INFORMATION	# Part Time Employees - One	Enter number: The number of part time employees.
PREMISES INFORMATION	Annual Revenues - One	Enter amount: The annual revenue amount for this location.
PREMISES INFORMATION	Occupied Area - One	Enter number: The area, in square feet, of the space in the building that is occupied by the named insured.
PREMISES INFORMATION	Open to Public Area - One	Enter number: The area, in square feet, of the building that is open to the public.
PREMISES INFORMATION	Total Building Area - One	Enter number: The number of square feet of the building at this location for which insurance is being requested.
PREMISES INFORMATION	Description of Operations - One	Enter text: The description of what business each applicant performs and the way it is conducted by premises. Operations which may not be apparent in a general description of operations may be segmented by location (e.g., location #1 is a sales office in Paris, France, location #2 is a warehouse in Berlin, Germany). Include number of leased and owned premises outside of the United States. The section should be completed in enough detail to enable the underwriter to understand and classify each operation. Do not use the classification wording from the Commercial Lines Manual or Workers Compensation Manual. They do not provide adequate detail. Example: a manufacturer of pulley wheels used in sewing machines should be described as such and not as "Metal Goods Mfg. N.O.C.".

PREMISES INFORMATION	Any area leased to others? - One	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any area leased to others?".
PREMISES INFORMATION	Loc # - Two	Enter number: The location number for the premises.
PREMISES INFORMATION	Bld # - Two	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
PREMISES INFORMATION	Address Line 1 - Two	Enter text: The first address line of the commercial structure.
PREMISES INFORMATION	Address Line 2 - Two	Enter text: The second address line of the commercial structure.
PREMISES INFORMATION	City - Two	Enter text: The city of the commercial structure.
PREMISES INFORMATION	County - Two	Enter text: The county of the commercial structure.
PREMISES INFORMATION	State - Two	Enter code: The state or province code of the commercial structure.
PREMISES INFORMATION	Zip - Two	Enter code: The postal code of the commercial structure.
PREMISES INFORMATION	City Limits Inside - Two	Check the box (if applicable): Indicates the building is within the city limits.
PREMISES INFORMATION	City Limits Outside - Two	Check the box (if applicable): Indicates the building is outside the city limits.
PREMISES INFORMATION	City Limits Other - Two	Check the box (if applicable): Indicates the building is not inside nor outside city limits. For example, unincorporated.
PREMISES INFORMATION	Other City Limits Description - Two	Enter text: The description of the risk location if not inside nor outside the city limits.
PREMISES INFORMATION	Interest Owner - Two	Check the box (if applicable): Indicates the named insured's interest in the building is as its owner.
PREMISES INFORMATION	Interest Tenant - Two	Check the box (if applicable): Indicates the named insured's interest in the building is as its tenant.
PREMISES INFORMATION	Other Interest - Two	Check the box (if applicable): Indicates the named insured's interest in the building is other than those listed.
PREMISES INFORMATION	Other Interest Description - Two	Enter text: The description of the insured's interest in the building when it is other than those listed.
PREMISES INFORMATION	# Full Time Employees - Two	Enter number: The number of full time employees.
PREMISES INFORMATION	# Part Time Employees - Two	Enter number: The number of part time employees.
PREMISES INFORMATION	Annual Revenues - Two	Enter amount: The annual revenue amount for this location.

PREMISES INFORMATION	Occupied Area - Two	Enter number: The area, in square feet, of the space in the building that is occupied by the named insured.
PREMISES INFORMATION	Open to Public Area - Two	Enter number: The area, in square feet, of the building that is open to the public.
PREMISES INFORMATION	Total Building Area - Two	Enter number: The number of square feet of the building at this location for which insurance is being requested.
PREMISES INFORMATION	Description of Operations - Two	Enter text: The description of what business each applicant performs and the way it is conducted by premises. Operations which may not be apparent in a general description of operations may be segmented by location (e.g., location #1 is a sales office in Paris, France, location #2 is a warehouse in Berlin, Germany). Include number of leased and owned premises outside of the United States. The section should be completed in enough detail to enable the underwriter to understand and classify each operation. Do not use the classification wording from the Commercial Lines Manual or Workers Compensation Manual. They do not provide adequate detail. Example: a manufacturer of pulley wheels used in sewing machines should be described as such and not as "Metal Goods Mfg. N.O.C.".
PREMISES INFORMATION	Any area leased to others? - Two	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any area leased to others?".
PREMISES INFORMATION	Loc # - Three	Enter number: The location number for the premises.
PREMISES INFORMATION	Bld # - Three	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
PREMISES INFORMATION	Address Line 1 - Three	Enter text: The first address line of the commercial structure.
PREMISES INFORMATION	Address Line 2 - Three	Enter text: The second address line of the commercial structure.
PREMISES INFORMATION	City - Three	Enter text: The city of the commercial structure.
PREMISES INFORMATION	County - Three	Enter text: The county of the commercial structure.
PREMISES INFORMATION	State - Three	Enter code: The state or province code of the commercial structure.
PREMISES INFORMATION	Zip - Three	Enter code: The postal code of the commercial structure.
PREMISES INFORMATION	City Limits Inside - Three	Check the box (if applicable): Indicates the building is within the city limits.
PREMISES INFORMATION	City Limits Outside - Three	Check the box (if applicable): Indicates the building is outside the city limits.
PREMISES INFORMATION	City Limits Other - Three	Check the box (if applicable): Indicates the building is not inside nor outside city limits. For example, unincorporated.
PREMISES INFORMATION	Other City Limits Description - Three	Enter text: The description of the risk location if not inside nor outside the city limits.
PREMISES INFORMATION	Interest Owner - Three	Check the box (if applicable): Indicates the named insured's interest in the building is as its owner.

PREMISES INFORMATION	Interest Tenant - Three	Check the box (if applicable): Indicates the named insured's interest in the building is as its tenant.
PREMISES INFORMATION	Other Interest - Three	Check the box (if applicable): Indicates the named insured's interest in the building is other than those listed.
PREMISES INFORMATION	Other Interest Description - Three	Enter text: The description of the insured's interest in the building when it is other than those listed.
PREMISES INFORMATION	# Full Time Employees - Three	Enter number: The number of full time employees.
PREMISES INFORMATION	# Part Time Employees - Three	Enter number: The number of part time employees.
PREMISES INFORMATION	Annual Revenues - Three	Enter amount: The annual revenue amount for this location.
PREMISES INFORMATION	Occupied Area - Three	Enter number: The area, in square feet, of the space in the building that is occupied by the named insured.
PREMISES INFORMATION	Open to Public Area - Three	Enter number: The area, in square feet, of the building that is open to the public.
PREMISES INFORMATION	Total Building Area - Three	Enter number: The number of square feet of the building at this location for which insurance is being requested.
PREMISES INFORMATION	Description of Operations - Three	Enter text: The description of what business each applicant performs and the way it is conducted by premises. Operations which may not be apparent in a general description of operations may be segmented by location (e.g., location #1 is a sales office in Paris, France, location #2 is a warehouse in Berlin, Germany). Include number of leased and owned premises outside of the United States. The section should be completed in enough detail to enable the underwriter to understand and classify each operation. Do not use the classification wording from the Commercial Lines Manual or Workers Compensation Manual. They do not provide adequate detail. Example: a manufacturer of pulley wheels used in sewing machines should be described as such and not as "Metal Goods Mfg. N.O.C.".
PREMISES INFORMATION	Any area leased to others? - Three	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any area leased to others?".
PREMISES INFORMATION	Loc # - Four	Enter number: The location number for the premises.
PREMISES INFORMATION	Bld # - Four	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
PREMISES INFORMATION	Address Line 1 - Four	Enter text: The first address line of the commercial structure.
PREMISES INFORMATION	Address Line 2 - Four	Enter text: The second address line of the commercial structure.
PREMISES INFORMATION	City - Four	Enter text: The city of the commercial structure.
PREMISES INFORMATION	County - Four	Enter text: The county of the commercial structure.

PREMISES INFORMATION	State - Four	Enter code: The state or province code of the commercial structure.
PREMISES INFORMATION	Zip - Four	Enter code: The postal code of the commercial structure.
PREMISES INFORMATION	City Limits Inside - Four	Check the box (if applicable): Indicates the building is within the city limits.
PREMISES INFORMATION	City Limits Outside - Four	Check the box (if applicable): Indicates the building is outside the city limits.
PREMISES INFORMATION	City Limits Other - Four	Check the box (if applicable): Indicates the building is not inside nor outside city limits. For example, unincorporated.
PREMISES INFORMATION	Other City Limits Description - Four	Enter text: The description of the risk location if not inside nor outside the city limits.
PREMISES INFORMATION	Interest Owner - Four	Check the box (if applicable): Indicates the named insured's interest in the building is as its owner.
PREMISES INFORMATION	Interest Tenant - Four	Check the box (if applicable): Indicates the named insured's interest in the building is as its tenant.
PREMISES INFORMATION	Other Interest - Four	Check the box (if applicable): Indicates the named insured's interest in the building is other than those listed.
PREMISES INFORMATION	Other Interest Description - Four	Enter text: The description of the insured's interest in the building when it is other than those listed.
PREMISES INFORMATION	# Full Time Employees - Four	Enter number: The number of full time employees.
PREMISES INFORMATION	# Part Time Employees - Four	Enter number: The number of part time employees.
PREMISES INFORMATION	Annual Revenues - Four	Enter amount: The annual revenue amount for this location.
PREMISES INFORMATION	Occupied Area - Four	Enter number: The area, in square feet, of the space in the building that is occupied by the named insured.
PREMISES INFORMATION	Open to Public Area - Four	Enter number: The area, in square feet, of the building that is open to the public.
PREMISES INFORMATION	Total Building Area - Four	Enter number: The number of square feet of the building at this location for which insurance is being requested.

PREMISES INFORMATION	Description of Operations - Four	Enter text: The description of what business each applicant performs and the way it is conducted by premises. Operations which may not be apparent in a general description of operations may be segmented by location (e.g., location #1 is a sales office in Paris, France, location #2 is a warehouse in Berlin, Germany). Include number of leased and owned premises outside of the United States. The section should be completed in enough detail to enable the underwriter to understand and classify each operation. Do not use the classification wording from the Commercial Lines Manual or Workers Compensation Manual. They do not provide adequate detail. Example: a manufacturer of pulley wheels used in sewing machines should be described as such and not as "Metal Goods Mfg. N.O.C.".
PREMISES INFORMATION	Any area leased to others? - Four	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any area leased to others?".
PREMISES INFORMATION	Loc # - Five	Enter number: The location number for the premises.
PREMISES INFORMATION	Bld # - Five	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
PREMISES INFORMATION	Address Line 1 - Five	Enter text: The first address line of the commercial structure.
PREMISES INFORMATION	Address Line 2 - Five	Enter text: The second address line of the commercial structure.
PREMISES INFORMATION	City - Five	Enter text: The city of the commercial structure.
PREMISES INFORMATION	County - Five	Enter text: The county of the commercial structure.
PREMISES INFORMATION	State - Five	Enter code: The state or province code of the commercial structure.
PREMISES INFORMATION	Zip - Five	Enter code: The postal code of the commercial structure.
PREMISES INFORMATION	City Limits Inside - Five	Check the box (if applicable): Indicates the building is within the city limits.
PREMISES INFORMATION	City Limits Outside - Five	Check the box (if applicable): Indicates the building is outside the city limits.
PREMISES INFORMATION	City Limits Other - Five	Check the box (if applicable): Indicates the building is not inside nor outside city limits. For example, unincorporated.
PREMISES INFORMATION	Other City Limits Description - Five	Enter text: The description of the risk location if not inside nor outside the city limits.
PREMISES INFORMATION	Interest Owner - Five	Check the box (if applicable): Indicates the named insured's interest in the building is as its owner.
PREMISES INFORMATION	Interest Tenant - Five	Check the box (if applicable): Indicates the named insured's interest in the building is as its tenant.
PREMISES INFORMATION	Other Interest - Five	Check the box (if applicable): Indicates the named insured's interest in the building is other than those listed.
PREMISES INFORMATION	Other Interest Description - Five	Enter text: The description of the insured's interest in the building when it is other than those listed.

PREMISES INFORMATION	# Full Time Employees - Five	Enter number: The number of full time employees.
PREMISES INFORMATION	# Part Time Employees - Five	Enter number: The number of part time employees.
PREMISES INFORMATION	Annual Revenues - Five	Enter amount: The annual revenue amount for this location.
PREMISES INFORMATION	Occupied Area - Five	Enter number: The area, in square feet, of the space in the building that is occupied by the named insured.
PREMISES INFORMATION	Open to Public Area - Five	Enter number: The area, in square feet, of the building that is open to the public.
PREMISES INFORMATION	Total Building Area - Five	Enter number: The number of square feet of the building at this location for which insurance is being requested.
PREMISES INFORMATION	Description of Operations - Five	Enter text: The description of what business each applicant performs and the way it is conducted by premises. Operations which may not be apparent in a general description of operations may be segmented by location (e.g., location #1 is a sales office in Paris, France, location #2 is a warehouse in Berlin, Germany). Include number of leased and owned premises outside of the United States. The section should be completed in enough detail to enable the underwriter to understand and classify each operation. Do not use the classification wording from the Commercial Lines Manual or Workers Compensation Manual. They do not provide adequate detail. Example: a manufacturer of pulley wheels used in sewing machines should be described as such and not as "Metal Goods Mfg. N.O.C.".
PREMISES INFORMATION	Any area leased to others? - Five	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any area leased to others?".
PREMISES INFORMATION	Loc # - Six	Enter number: The location number for the premises.
PREMISES INFORMATION	Bld # - Six	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
PREMISES INFORMATION	Address Line 1 - Six	Enter text: The first address line of the commercial structure.
PREMISES INFORMATION	Address Line 2 - Six	Enter text: The second address line of the commercial structure.
PREMISES INFORMATION	City - Six	Enter text: The city of the commercial structure.
PREMISES INFORMATION	County - Six	Enter text: The county of the commercial structure.
PREMISES INFORMATION	State - Six	Enter code: The state or province code of the commercial structure.
PREMISES INFORMATION	Zip - Six	Enter code: The postal code of the commercial structure.
PREMISES INFORMATION	City Limits Inside - Six	Check the box (if applicable): Indicates the building is within the city limits.
PREMISES INFORMATION	City Limits Outside - Six	Check the box (if applicable): Indicates the building is outside the city limits.

PREMISES INFORMATION	City Limits Other - Six	Check the box (if applicable): Indicates the building is not inside nor outside city limits. For example, unincorporated.
PREMISES INFORMATION	Other City Limits Description - Six	Enter text: The description of the risk location if not inside nor outside the city limits.
PREMISES INFORMATION	Interest Owner - Six	Check the box (if applicable): Indicates the named insured's interest in the building is as its owner.
PREMISES INFORMATION	Interest Tenant - Six	Check the box (if applicable): Indicates the named insured's interest in the building is as its tenant.
PREMISES INFORMATION	Other Interest - Six	Check the box (if applicable): Indicates the named insured's interest in the building is other than those listed.
PREMISES INFORMATION	Other Interest Description - Six	Enter text: The description of the insured's interest in the building when it is other than those listed.
PREMISES INFORMATION	# Full Time Employees - Six	Enter number: The number of full time employees.
PREMISES INFORMATION	# Part Time Employees - Six	Enter number: The number of part time employees.
PREMISES INFORMATION	Annual Revenues - Six	Enter amount: The annual revenue amount for this location.
PREMISES INFORMATION	Occupied Area - Six	Enter number: The area, in square feet, of the space in the building that is occupied by the named insured.
PREMISES INFORMATION	Open to Public Area - Six	Enter number: The area, in square feet, of the building that is open to the public.
PREMISES INFORMATION	Total Building Area - Six	Enter number: The number of square feet of the building at this location for which insurance is being requested.
PREMISES INFORMATION	Description of Operations - Six	Enter text: The description of what business each applicant performs and the way it is conducted by premises. Operations which may not be apparent in a general description of operations may be segmented by location (e.g., location #1 is a sales office in Paris, France, location #2 is a warehouse in Berlin, Germany). Include number of leased and owned premises outside of the United States. The section should be completed in enough detail to enable the underwriter to understand and classify each operation. Do not use the classification wording from the Commercial Lines Manual or Workers Compensation Manual. They do not provide adequate detail. Example: a manufacturer of pulley wheels used in sewing machines should be described as such and not as "Metal Goods Mfg. N.O.C.".
PREMISES INFORMATION	Any area leased to others? - Six	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any area leased to others?".
PREMISES INFORMATION	Loc # - Seven	Enter number: The location number for the premises.
PREMISES INFORMATION	Bld # - Seven	Enter number: The building number for the premises. Used when more than one building exists at an individual location.

PREMISES INFORMATION	Address Line 1 - Seven	Enter text: The first address line of the commercial structure.
PREMISES INFORMATION	Address Line 2 - Seven	Enter text: The second address line of the commercial structure.
PREMISES INFORMATION	City - Seven	Enter text: The city of the commercial structure.
PREMISES INFORMATION	County - Seven	Enter text: The county of the commercial structure.
PREMISES INFORMATION	State - Seven	Enter code: The state or province code of the commercial structure.
PREMISES INFORMATION	Zip - Seven	Enter code: The postal code of the commercial structure.
PREMISES INFORMATION	City Limits Inside - Seven	Check the box (if applicable): Indicates the building is within the city limits.
PREMISES INFORMATION	City Limits Outside - Seven	Check the box (if applicable): Indicates the building is outside the city limits.
PREMISES INFORMATION	City Limits Other - Seven	Check the box (if applicable): Indicates the building is not inside nor outside city limits. For example, unincorporated.
PREMISES INFORMATION	Other City Limits Description - Seven	Enter text: The description of the risk location if not inside nor outside the city limits.
PREMISES INFORMATION	Interest Owner - Seven	Check the box (if applicable): Indicates the named insured's interest in the building is as its owner.
PREMISES INFORMATION	Interest Tenant - Seven	Check the box (if applicable): Indicates the named insured's interest in the building is as its tenant.
PREMISES INFORMATION	Other Interest - Seven	Check the box (if applicable): Indicates the named insured's interest in the building is other than those listed.
PREMISES INFORMATION	Other Interest Description - Seven	Enter text: The description of the insured's interest in the building when it is other than those listed.
PREMISES INFORMATION	# Full Time Employees - Seven	Enter number: The number of full time employees.
PREMISES INFORMATION	# Part Time Employees - Seven	Enter number: The number of part time employees.
PREMISES INFORMATION	Annual Revenues - Seven	Enter amount: The annual revenue amount for this location.
PREMISES INFORMATION	Occupied Area - Seven	Enter number: The area, in square feet, of the space in the building that is occupied by the named insured.
PREMISES INFORMATION	Open to Public Area - Seven	Enter number: The area, in square feet, of the building that is open to the public.
PREMISES INFORMATION	Total Building Area - Seven	Enter number: The number of square feet of the building at this location for which insurance is being requested.

PREMISES INFORMATION	Description of Operations - Seven	Enter text: The description of what business each applicant performs and the way it is conducted by premises. Operations which may not be apparent in a general description of operations may be segmented by location (e.g., location #1 is a sales office in Paris, France, location #2 is a warehouse in Berlin, Germany). Include number of leased and owned premises outside of the United States. The section should be completed in enough detail to enable the underwriter to understand and classify each operation. Do not use the classification wording from the Commercial Lines Manual or Workers Compensation Manual. They do not provide adequate detail. Example: a manufacturer of pulley wheels used in sewing machines should be described as such and not as "Metal Goods Mfg. N.O.C.".
PREMISES INFORMATION	Any area leased to others? - Seven	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any area leased to others?".
PREMISES INFORMATION	Loc # - Eight	Enter number: The location number for the premises.
PREMISES INFORMATION	Bld # - Eight	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
PREMISES INFORMATION	Address Line 1 - Eight	Enter text: The first address line of the commercial structure.
PREMISES INFORMATION	Address Line 2 - Eight	Enter text: The second address line of the commercial structure.
PREMISES INFORMATION	City - Eight	Enter text: The city of the commercial structure.
PREMISES INFORMATION	County - Eight	Enter text: The county of the commercial structure.
PREMISES INFORMATION	State - Eight	Enter code: The state or province code of the commercial structure.
PREMISES INFORMATION	Zip - Eight	Enter code: The postal code of the commercial structure.
PREMISES INFORMATION	City Limits Inside - Eight	Check the box (if applicable): Indicates the building is within the city limits.
PREMISES INFORMATION	City Limits Outside - Eight	Check the box (if applicable): Indicates the building is outside the city limits.
PREMISES INFORMATION	City Limits Other - Eight	Check the box (if applicable): Indicates the building is not inside nor outside city limits. For example, unincorporated.
PREMISES INFORMATION	Other City Limits Description - Eight	Enter text: The description of the risk location if not inside nor outside the city limits.
PREMISES INFORMATION	Interest Owner - Eight	Check the box (if applicable): Indicates the named insured's interest in the building is as its owner.
PREMISES INFORMATION	Interest Tenant - Eight	Check the box (if applicable): Indicates the named insured's interest in the building is as its tenant.
PREMISES INFORMATION	Other Interest - Eight	Check the box (if applicable): Indicates the named insured's interest in the building is other than those listed.
PREMISES INFORMATION	Other Interest Description - Eight	Enter text: The description of the insured's interest in the building when it is other than those listed.

PREMISES INFORMATION	# Full Time Employees - Eight	Enter number: The number of full time employees.
PREMISES INFORMATION	# Part Time Employees - Eight	Enter number: The number of part time employees.
PREMISES INFORMATION	Annual Revenues - Eight	Enter amount: The annual revenue amount for this location.
PREMISES INFORMATION	Occupied Area - Eight	Enter number: The area, in square feet, of the space in the building that is occupied by the named insured.
PREMISES INFORMATION	Open to Public Area - Eight	Enter number: The area, in square feet, of the building that is open to the public.
PREMISES INFORMATION	Total Building Area - Eight	Enter number: The number of square feet of the building at this location for which insurance is being requested.
PREMISES INFORMATION	Description of Operations - Eight	Enter text: The description of what business each applicant performs and the way it is conducted by premises. Operations which may not be apparent in a general description of operations may be segmented by location (e.g., location #1 is a sales office in Paris, France, location #2 is a warehouse in Berlin, Germany). Include number of leased and owned premises outside of the United States. The section should be completed in enough detail to enable the underwriter to understand and classify each operation. Do not use the classification wording from the Commercial Lines Manual or Workers Compensation Manual. They do not provide adequate detail. Example: a manufacturer of pulley wheels used in sewing machines should be described as such and not as "Metal Goods Mfg. N.O.C.".
PREMISES INFORMATION	Any area leased to others? - Eight	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any area leased to others?".
PREMISES INFORMATION	Loc # - Nine	Enter number: The location number for the premises.
PREMISES INFORMATION	Bld # - Nine	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
PREMISES INFORMATION	Address Line 1 - Nine	Enter text: The first address line of the commercial structure.
PREMISES INFORMATION	Address Line 2 - Nine	Enter text: The second address line of the commercial structure.
PREMISES INFORMATION	City - Nine	Enter text: The city of the commercial structure.
PREMISES INFORMATION	County - Nine	Enter text: The county of the commercial structure.
PREMISES INFORMATION	State - Nine	Enter code: The state or province code of the commercial structure.
PREMISES INFORMATION	Zip - Nine	Enter code: The postal code of the commercial structure.
PREMISES INFORMATION	City Limits Inside - Nine	Check the box (if applicable): Indicates the building is within the city limits.
PREMISES INFORMATION	City Limits Outside - Nine	Check the box (if applicable): Indicates the building is outside the city limits.

PREMISES INFORMATION	City Limits Other - Nine	Check the box (if applicable): Indicates the building is not inside nor outside city limits. For example, unincorporated.
PREMISES INFORMATION	Other City Limits Description - Nine	Enter text: The description of the risk location if not inside nor outside the city limits.
PREMISES INFORMATION	Interest Owner - Nine	Check the box (if applicable): Indicates the named insured's interest in the building is as its owner.
PREMISES INFORMATION	Interest Tenant - Nine	Check the box (if applicable): Indicates the named insured's interest in the building is as its tenant.
PREMISES INFORMATION	Other Interest - Nine	Check the box (if applicable): Indicates the named insured's interest in the building is other than those listed.
PREMISES INFORMATION	Other Interest Description - Nine	Enter text: The description of the insured's interest in the building when it is other than those listed.
PREMISES INFORMATION	# Full Time Employees - Nine	Enter number: The number of full time employees.
PREMISES INFORMATION	# Part Time Employees - Nine	Enter number: The number of part time employees.
PREMISES INFORMATION	Annual Revenues - Nine	Enter amount: The annual revenue amount for this location.
PREMISES INFORMATION	Occupied Area - Nine	Enter number: The area, in square feet, of the space in the building that is occupied by the named insured.
PREMISES INFORMATION	Open to Public Area - Nine	Enter number: The area, in square feet, of the building that is open to the public.
PREMISES INFORMATION	Total Building Area - Nine	Enter number: The number of square feet of the building at this location for which insurance is being requested.
PREMISES INFORMATION	Description of Operations - Nine	Enter text: The description of what business each applicant performs and the way it is conducted by premises. Operations which may not be apparent in a general description of operations may be segmented by location (e.g., location #1 is a sales office in Paris, France, location #2 is a warehouse in Berlin, Germany). Include number of leased and owned premises outside of the United States. The section should be completed in enough detail to enable the underwriter to understand and classify each operation. Do not use the classification wording from the Commercial Lines Manual or Workers Compensation Manual. They do not provide adequate detail. Example: a manufacturer of pulley wheels used in sewing machines should be described as such and not as "Metal Goods Mfg. N.O.C.".
PREMISES INFORMATION	Any area leased to others? - Nine	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any area leased to others?".
PREMISES INFORMATION	Loc # - Ten	Enter number: The location number for the premises.

PREMISES INFORMATION	Bld # - Ten	Enter number: The building number for the premises. Used when more than one building exists at an individual location.
PREMISES INFORMATION	Address Line 1 - Ten	Enter text: The first address line of the commercial structure.
PREMISES INFORMATION	Address Line 2 - Ten	Enter text: The second address line of the commercial structure.
PREMISES INFORMATION	City - Ten	Enter text: The city of the commercial structure.
PREMISES INFORMATION	County - Ten	Enter text: The county of the commercial structure.
PREMISES INFORMATION	State - Ten	Enter code: The state or province code of the commercial structure.
PREMISES INFORMATION	Zip - Ten	Enter code: The postal code of the commercial structure.
PREMISES INFORMATION	City Limits Inside - Ten	Check the box (if applicable): Indicates the building is within the city limits.
PREMISES INFORMATION	City Limits Outside - Ten	Check the box (if applicable): Indicates the building is outside the city limits.
PREMISES INFORMATION	City Limits Other - Ten	Check the box (if applicable): Indicates the building is not inside nor outside city limits. For example, unincorporated.
PREMISES INFORMATION	Other City Limits Description - Ten	Enter text: The description of the risk location if not inside nor outside the city limits.
PREMISES INFORMATION	Interest Owner - Ten	Check the box (if applicable): Indicates the named insured's interest in the building is as its owner.
PREMISES INFORMATION	Interest Tenant - Ten	Check the box (if applicable): Indicates the named insured's interest in the building is as its tenant.
PREMISES INFORMATION	Other Interest - Ten	Check the box (if applicable): Indicates the named insured's interest in the building is other than those listed.
PREMISES INFORMATION	Other Interest Description - Ten	Enter text: The description of the insured's interest in the building when it is other than those listed.
PREMISES INFORMATION	# Full Time Employees - Ten	Enter number: The number of full time employees.
PREMISES INFORMATION	# Part Time Employees - Ten	Enter number: The number of part time employees.
PREMISES INFORMATION	Annual Revenues - Ten	Enter amount: The annual revenue amount for this location.
PREMISES INFORMATION	Occupied Area - Ten	Enter number: The area, in square feet, of the space in the building that is occupied by the named insured.
PREMISES INFORMATION	Open to Public Area - Ten	Enter number: The area, in square feet, of the building that is open to the public.
PREMISES INFORMATION	Total Building Area - Ten	Enter number: The number of square feet of the building at this location for which insurance is being requested.

PREMISES INFORMATION	Description of Operations - Ten	Enter text: The description of what business each applicant performs and the way it is conducted by premises. Operations which may not be apparent in a general description of operations may be segmented by location (e.g., location #1 is a sales office in Paris, France, location #2 is a warehouse in Berlin, Germany). Include number of leased and owned premises outside of the United States. The section should be completed in enough detail to enable the underwriter to understand and classify each operation. Do not use the classification wording from the Commercial Lines Manual or Workers Compensation Manual. They do not provide adequate detail. Example: a manufacturer of pulley wheels used in sewing machines should be described as such and not as "Metal Goods Mfg. N.O.C.".
PREMISES INFORMATION	Any area leased to others? - Ten	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any area leased to others?".