

Upload a PDF of your commercial client and PDF Rater will use that data to populate the commercial application with the information from your management system. If there's any information missing or the carrier requires additional information, you'll be prompted to enter ony that additional information before getting proposals back from all available carriers.

ACORD [®] COMMERCIAL INSURANCE APPLICATION								ION		Comm App : Summary		
DENCY				LIGANTINI OK	CARRIE				_	uestions, additional information, and/or quotes will be sent to the following	ng agent:	
emo Accoun	CANNER					Name: John Pergande						
550 Bailev Ave						COMPANY POLICY OR PROGRAM NAME				Email: jp@insurezone.com		
Suite 150						COMPART POLICY ON PRODUCTION RAIL				Phone: 817-704-2240		
									_			
FORT WORTH, TX 76107												
CONTACT John Pergande						UNDERWRITER UNDE				Jump to SelectCoverage		
HONE		817-704-224	10		1					Jump to BusinessInfo		
AX Not			-		-		X QUO	TE		Jump to Building		
MAIL DORESS:	ing	insurezone.	com		STATUS O	F	BOUT	ND (Give Dat	te and/or A	Jump to Gen Liab		
ODE:	1000	SUBCODE:			IRANDAL	TION	CHA		DATE	Jump to BOPMiscellaneous		
GENCY CUSTOMER ID:			-		1		CAN	CEL		Jump to SelectEndorsements		
ECTIONS ATTACH	FD				-					Jump to SelectTieBreakers		
DICATE SECTIONS ATTA		PREMIUM				PREMIUM						
ACCOUNTS RECEIVA	ABLE /	1		ELECTRONIC DATA PROC	0	1	_	TRANSP	ORTATIC			
BOILER & MACHINER		\$		FOUIPMENT FLOATER		5	-	TRUCKE		SelectCoverage	Edit	
BUSINESS AUTO		\$	H	GARAGE AND DEALERS		5	-	UMBREU				
BUSINESS OWNERS		1		GLASS AND SIGN		5	-	YACHT	_			
COMMERCIAL GENER			\vdash	INSTALLATION / BUILDER	RISK			-	-	Coverage Selection	hn	
CRIME			H	OPEN CARGO			-	-				
DEALERS			H	PROPERTY			-	-		Application Id	5615413	
TTACHMENTS			-					_		Created On	1/14/2019 02:00:04 PM	
ADDITIONAL INTERES	OT.			PREMIUM PAYMENT SUP	OI EMENT		-	-		Submitted On	1/14/2019 02:12:40 PM	
ADDITIONAL INTEREST				PROFESSIONAL LIABILITY		INT	-	-	_	Please complete the following information so we can quickly de	termine if our insurance products a	
ADDITIONAL PREMISES					ESTAURANT / TAVERN SUPPLEMENT			+	_	available to the business. Please note: Correctly classifying the		
CONDO ASSN BYLAWS (for D&O Coverage only)					TATEMENT / SCHEDULE OF VALUES				_	your quote.		
concerned to the ball of the ball containing only /				STATE SUPPLEMENT (If applicable)				-	_	Coverage Available		
COVERAGES SCHEDULE VACANT BUILDING SUP										Professional Liability	No	
DRIVER INFORMATION SCHEDULE				VEHICLE SCHEDULE		-	-		Businessowners/Package Policy	No		
INTERNATIONAL LIABILITY EXPOSURE SUPPLEMENT				VEHICLE SCHEDULE		-	-		General Liability	Yes		
INTERNATIONAL PROPERTY EXPOSURE SUPPLEMENT				<u> </u>				Workers' Compensation	No			
LOSS SUMMARY				-	_	Commercial Auto	No					
OLICY INFORMAT	TION .		-						_	Umbrella	No	
ROPOSED EFF DATE PR				DAVMENT DI AN	METHO	O OF PAYMER			POSIT	Professional Liability (Errors and Omissions)	No	
	04/02/20		_				NO		0.011	Non-Profit Directors & Officers	No	
		X DIRECT	AG	DENCY			NO	•		Non-Profit Employment Practices Liability	No	
PPLICANT INFOR										For-Profit Directors & Officers	No	
IAME (First Named Insured) AND MAILING ADDRESS (including ZIP+4) GL CODE										For-Profit Employment Practices Liability	No	
A Great Adventure Events, LLC 2427 N Clybourn, G Unit, CHICAGO, IL							72	299	8	For-Profit Crime	Ne	
					BUSINESS PHONE #: 312-				312-	For-Profit Fiduciary	No	
60614						WEBSITE ADDRESS				Number of Lines Requested	1	
						www.a			ntu	State where business is headquartered	i.	
CORPORATION	JOINT VENTU			NOT FOR PROFIT OR	0	SUBCHAPTER	R "S" CORPO	ORATION		Type of Business	Service - Personal Care	
INDIVIDUAL		MEMBERS 1	_ [PARTNERSHIP		TRUST				Class of Operation	Miscellaneous Personal Care Service	
AME (Other Named Insure	ed) AND MAILING A	DDRESS (including Z	(P+4))	GL CODE		SIC		NAICS	Operation Description	Wedding planning services	
										NAICS/SIC/ISO	812199/7299/	
BUSINESS PHONE #										Describe in detail all the products, services, and/or operations the	wedding planning service	
					WEBSITE	ADDRESS				business provides. Please include the insured's website, if available.	wedding planning service	
CORPORATION	JOINT VENTU		Т	NOT FOR PROFIT OR	0	SUBCHAPTER	R "S" CORPO	ORATION		Applicant Information		
INDIVIDUAL	LLC AND MA	MEMBERS	1	PARTNERSHIP		TRUST				Modification of legal type or business name or other personal in	formation on the carrier site may	
AME (Other Named Insure	ed) AND MAILING A	DDRESS (including 2)	P+4)		GL CODE		SIC		NAICS	trigger a new credit search and affect the premium.		
										Is the business considered non-profit?	No	
					BUSINESS	PHONE #		_	_	Easy-reference description for this application. (Assign a unique name to the	.is copied application	
					WEBSITE	ADDRESS			_	application for easy identification.)		
										Edit		
CORPORATION	JOINT VENTU	RE		NOT FOR PROFIT OR		SUBCHAPTER	R "S" CORPO	ORATION		Qualifying Questions		
NOMIDUAL	LLC NO. OF		- ł	PARTNERSHIP		TRUST				Does the business place temporary workers or lease employees?	No	
CORD 125 (2013/0					1 of 4	@ 19	93-2013	ACORD	CORPO		No	
		The A	COF	RD name and logo a						Does the business own any vehicles?	NO	
				a mane and logo a			AUC			Notes to Underwriter		

