

FIRE (dwelling or mobilehomes) COMMERCIAL FIRE COMBINATION PACKAGE (Fire & Liability)

**APPLICATION
and
AGENT'S RECORD**

No.

Renewing Policy No.

**THE JUNIATA
MUTUAL INSURANCE COMPANY**

OF McALISTERVILLE, PA.

.....AGENT

Fire Amount \$..... Rate..... Premium \$..... Total
Extended Coverage Rate..... Premium \$..... Premium \$.....

***No insurance attaches in connection with Extended Coverage Perils unless "Rate" and "Premiums" is specified above and Extended Coverage endorsement is attached to this policy.**

from the day of 19....., to the
..... day of 19....., on the
property below specified and valued by the applicant.

ATTACH FORM BELOW THIS LINE

This policy covers the following described property, all situated in Township, County
.....
Street Number or Lot Block Number City or Town

Item 1. \$..... On story Dwelling house roof,
Item 2. \$..... On Household furniture, provisions, clothing, carpet, rugs, bedding, musical instruments and
Item 3. \$..... sporting goods, in the above described dwelling.

Protection Class

Number of Families

\$..... Aggregate Amounts

Subject to form No. (s)

In whose name is the title or realty, Occupied by, Renewal
of policy No., Additional Insurance Company..... Amount \$
Is the property encumbered Mortgagee
Yes or No Yes or No

Countersigned this day of, 19..... Agent

THE FOLLOWING QUESTIONS MUST BE ANSWERED FULLY AND DEFINITELY BY THE AGENT AND INSURED.

1. Month/Year dwelling purchased Purchase Price \$.....
2. Are any business operations conducted on the premises? Yes No If yes, what is the business?
3. Are there any outbuildings on the premises? Yes No
4. What is your primary source of heat?..... Do you have a fireplace?..... How Many?.....
5. Do you have a wood or coal burning heating device? Yes No If yes, please attach photo and woodstove report.
 - a. Who installed unit? (contractor, self, in home when purchased, etc.)
 - b. How often used? (daily, weekly, monthly) during months of to
 - c. How often is chimney/flue cleaned? last cleaned?
6. Is the dwelling under construction? Yes No Is the dwelling being remodeled? Yes No
7. Have you declared bankruptcy or sought protection from creditors within the last 5 years? Yes No
8. Has any member of your household had a loss covered by any type of property insurance or premises liability in the last 5 years? Yes No If yes, give date, kind, cause and amount of damages.
9. Have you ever had similar insurance cancelled, declined, or renewal refused? Yes No

No.....Renewal of No.....
 Insured.....
 Date.....
 Term.....
 Expiration.....
 Location.....
 Mailing Address.....

**THE JUNIATA
 MUTUAL INSURANCE
 COMPANY**
 OF MCALISTERVILLE, PA.

Amount Insured, \$.....
 Fire Rate, \$.....
 E.C. Rate, \$.....
 Premium, \$.....
, Agent

10. Are there any dogs or horses kept on premises? Yes No
11. Is dwelling tenant occupied? Yes No Name of tenant?
12. Is property vacant or unoccupied? Yes No
13. Is property for sale? Yes No
14. Are all porches, walkways and steps in good condition? Yes No
15. Has this Company any other insurance in said building? Yes No If so, for whom and what amount?
16. If there is other insurance on the property, state particularly how it covers?
17. Are you personally acquainted with the applicant and risk?

State distance to OTHER BUILDINGS within 150 feet.
 Of what are they constructed and how occupied?

NORTH _____
 SOUTH _____
 EAST _____
 WEST _____

If other EXPOSURES, name them.

"Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties."

Agent's Signature.....

Insured's Signature.....