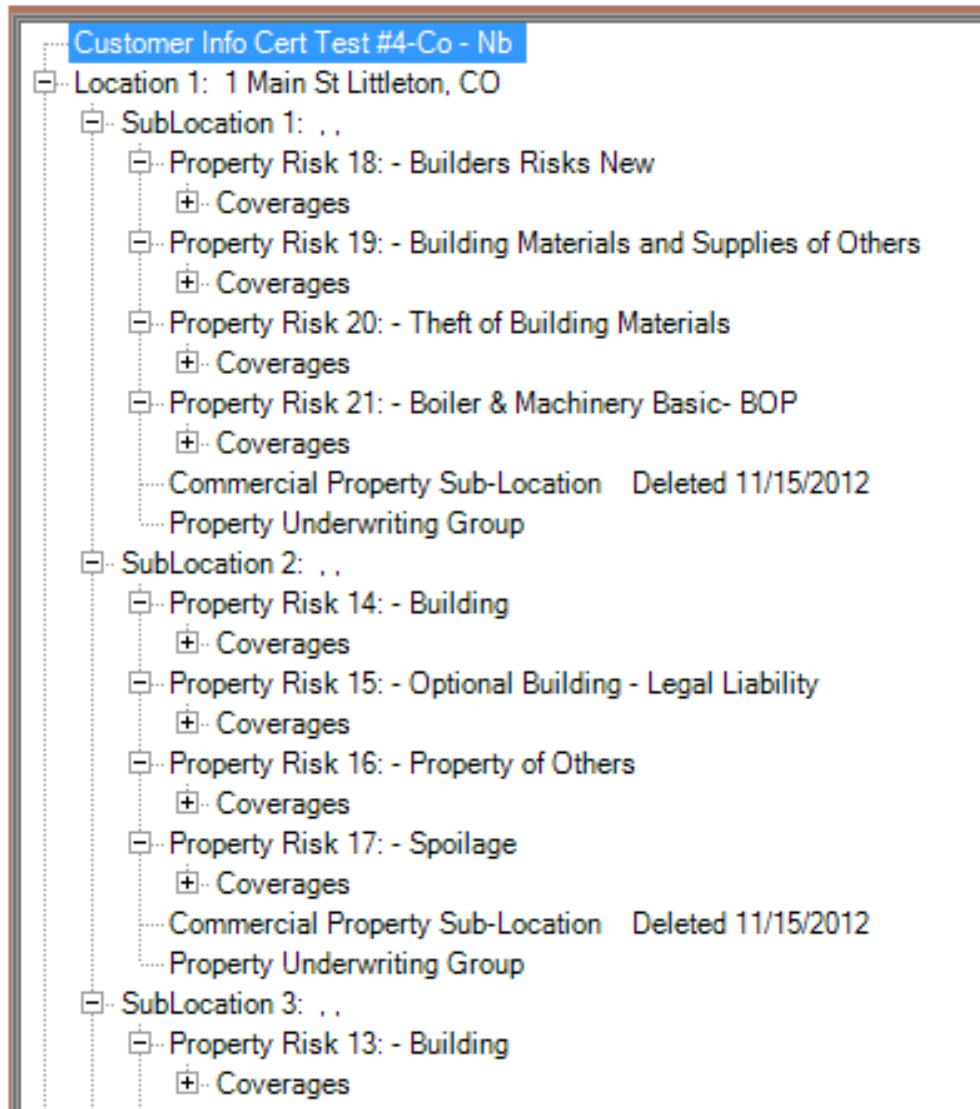


## ACORD139 Statement of Values (2004/03)

The ACORD 139, Statement of Values was developed to assist in the collection of information when multiple locations owned or operated by the same insured will be included in an average or blanket rated property insurance policy. This form is not intended to replace specific ACORD applications, such as ACORD 140, Property Section, or ACORD 160, Business Owners Application. Note: Use ACORD 159, Schedule of Insurance, when an average or blanket rate does not apply, but multiple locations owned or operated by the same insured will be covered under a single policy, with separate limits applying to each location.

A typical PROP policy might be structured similarly to this, but many variations do exist:



Basic Applicant Information – this information is from the agency and customer’s information. If Policy Underwriting has been added and the Policy Type has been added. Other check boxes have not yet been identified. If you can help with data that would select this please email support@nasasoft.com.



## STATEMENT OF VALUES

AGENCY	PHONE (A/C, No, Ext): 320-254-8224	COMPANY	NAIC CODE: 24112
	FAX (A/C, No): 320-254-3633		Westfield
North American Agency PO Box 560 Belgrade, MN 56312		INSURED / APPLICANT	POLICY NUMBER
		Cert Test #4-Co - Nb	
CODE: _____ SUBCODE: _____		HEADQUARTERS ADDRESS	
AGENCY CUSTOMER ID 109647			
		COINS %	APPLICABLE CAUSES OF LOSS
		<input type="checkbox"/> 80%	<input type="checkbox"/> BASIC <input type="checkbox"/> EARTHQUAKE COV
		<input type="checkbox"/> 90%	<input type="checkbox"/> BROAD <input type="checkbox"/> FLOOD
		<input type="checkbox"/> 100%	<input type="checkbox"/> SPECIAL <input type="checkbox"/> SPRINKLER LEAKAGE EXCL
		<input checked="" type="checkbox"/> DFL IXF	<input type="checkbox"/> VANDALISM EXCL

Property Risk Information – This section utilizes information from the location and sub-location as well as the property risk. The Class Code, ACV/RC, Description, Subject, and 100% Values are filled from the property risk, the Loc # from the location it is attached to, the Bldg # from the sub-location, and the Premium is totaled from any coverage records that are attached to the risk. At this time the Rate or Loss Cost is not yet identified or filled. If more than 11 property risks exist additional forms will be created.

CLASS CODE	LOC #	BLDG #	DESCRIPTION AND ADDRESS OF PROPERTY	ACV/RC 1	SUBJECT 2	100% VALUES
C	1	1	DESC: Builders Risks New ADDRESS: Building 1 Location 1 SubLoc: 01	A	BRNEW	300,000
	1	1	DESC: Building Materials and Supplies of Others ADDRESS: Building 1 Location 1 SubLoc: 01		BRBMS	100,000
			DESC: Theft of Building Materials			

Instructions and Signature – The signature that fills here can be captured from a signature pad or the insured must sign and date the form here.

### INSTRUCTIONS

- ACV (Actual Cash Value) or RC (Replacement Cost): If other valuation basis applies, provide necessary information.
- SUBJECT:  
B = Building S = Stock F = Furniture & Fixtures M = Machinery  
BPP = Your Business Personal Property PPO = Personal Property of Others  
BI = Business Income R = Rental Income Other - specify
- RATE OR LOSS COST: For class rated property, attach class rate information form or equivalent information for each location. For specifically rated property,

### SIGNATURE

ALL VALUES AND LOCATION INFORMATION ARE CORRECT AND BELIEF

INSURED'S SIGNATURE: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

11/02/2012 - Filling in this form includes these ACORD standards:

5BPI – Basic policy information

6CPO – Commercial Lines Policy Information Group

5LAG – Location Address Group

5SLC – Sub-location Group

6SOI – Commercial Property Subject of Insurance Group is the primary unit at risk group

5CVG – Coverage information