

Equipment Floater Section ACORD152 (2015/06)

ACORD 152, Commercial Inland Marine Section, is used to collect underwriting and rating information for equipment schedules and other applicable Inland Marine classes that don't have an associated ACORD form, including those for cameras, musical instruments and physician and surgeon equipment.

This form was designed to be used in conjunction with the Commercial Insurance Application - Applicant Information Section (ACORD 125). Refer to the document on the ACORD 125 for information on that form. Most information for the Identification Section should match the data found within the Applicant Information Section (ACORD 125). However, it is still important to complete the section. Many companies, for rating purposes, separate the applications by line of business. Not completing this part of the application makes it difficult to keep track of the full account.

To create this form you may begin at the policy or any level below it. The best place to create this form is from the policy level as this is where the UQG are found in most instances. This form is attached to the ACORD125 when submitted.

If there are more commercial scheduled item risks than can fit on the form additional page 2's (acord152x_2015/06.pdf) of the form will be created. Also, if there are more additional insured's than will fit on the form, an ACORD45 will be automatically created.

Customer Info STROOT LOCKERS INC

- [-] Coverages
 - ... APMP
- [+] Forms
- [-] StateGroup: KS
 - [-] Location 1: 111 N MAIN ST, GODDARD, KS
 - ... SubLocation 1: ..
 - [-] Location 9999: Policy Level Coverages, .
 - [-] SubLocation 1: ..
 - [-] Inland Marine Risk 1: - CL Inland Marine Code - Contractors Equipment
 - ... OLT - Architects, Engineers, or Surveyors (use AG instead): Belgrade State Bank
 - [-] Coverages
 - ... CONEQ/15,000
 - ... TOBE 5,000
 - ... SPARE 5,000
 - ... RREIM 5,000
 - ... PULCR 25,000
 - ... NEW 30
 - ... DEBRL 5,000
 - [-] Inland Marine Risk 2: - CL Inland Marine Code - Contractors Equipment
 - [-] Coverages
 - ... CONEQ 25,000/25,000 Ded:500
 - ... Inland Marine Risk 3: - Inland Marine Code - CONEQ - Contractors Equipment
 - ... Policy Underwriting
 - [-] Underwriting Questions
 - ... Equipment rented, loaned to/from others with/without operations? - Y
 - ... Is applicant operating equipment not listed here? - N
 - ... Property used underground? - Y
 - ... Any work done afloat? - N

Basic Applicant and Basic Policy Information – This information is from the customer's information and policy details.



COMMERCIAL INLAND MARINE SECTION

DATE (MM/DD/YYYY)
6/13/2018

AGENCY North American Agency		CARRIER TEST 1		NAIC CODE 15954
POLICY NUMBER KBP1031603	EFFECTIVE DATE 01/01/2015	APPLICANT / FIRST NAMED INSURED Becker Quick Stop		

Summary Information –As illustrated below, a policy location designates a general place of business and specific building or buildings should be included as a sub-location. The addresses from these records are placed under **LOC #** and **BLD #**.

For each inland marine risk attached to a location or sub-location a line is included under **Class Code**. The **Subclass Code**, **Description**, **Scheduled/Unscheduled Code**, **Number of Items per Classification**, **Valuation Type**, **Blanket #**, **Max Item Value**, and **Coinsurance Percentage** columns are filled with the description or code from the risk’s drop downs.

SUMMARY INFORMATION

SCH #	LOC #	BLD #	CLASS CODE	SUBCLASS CODE	DESCRIPTION	SCH Y/N	NUM ITEMS	VALUATION	BLKT #	MAX ITEM VALUE	% COINS
1	1	1	MTRTK	FRUIT	Motor Truck Cargo - Fruit	Y		A		\$	90.00 %
2										\$	%
3										\$	%
4										\$	%
5										\$	%
6										\$	%
7										\$	%
8										\$	%
9										\$	%
10										\$	%

The **Coverages/Causes of Loss** section is filled if a coverage code is attached to the inland marine risk. When entering the coverage detail, if the **Limit 1-2**, **Deductible**, and **Premium** are entered they will display in the corresponding columns. When opening the coverage detail, if a “Basis Code” is entered on a Limit or Deductible it will pre-fill **Limit Applies To** and **Ded Type**. If a value is included in the coverage code’s “Percent of Co-insurance” under the Additional Tab, the **Coins %** column is filled.

COVERAGES / CAUSES OF LOSS

SCH #	POL LVL Y/N	COV CODE	DESCRIPTION	LIMIT	LIMIT APPLIES TO	LIMIT	LIMIT APPLIES TO	DED	DIED TYPE	OPT CODE	% COINS	PREMIUM
1		MTC		\$ 10,000.00		\$ 2,000.00		200.00	DO		80.00 %	\$ 125.00
1		PI		\$ 1,000,000.00		\$					%	\$
				\$		\$					%	\$
				\$		\$					%	\$
				\$		\$					%	\$
				\$		\$					%	\$
				\$		\$					%	\$
				\$		\$					%	\$
				\$		\$					%	\$
				\$		\$					%	\$

Equipment Storage – is available by clicking the “Equipment Storage Locations” button at the top, left of the screen when in the location or sub-location. It will fill: **# of Months Stored**, **Maximum Value Inside**, **Maximum Value Outside**, and **Type of Security**.

EQUIPMENT STORAGE

LOC #	BLD #	NUM MOS	MAXIMUM VALUE INSIDE	MAXIMUM VALUE OUTSIDE	TYPE OF SECURITY
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	

Underwriting Questions – These questions can be accessed and added in two different ways. Some companies do download them. If your agency is manually entering this information and want to select the questions for this or any other form, select the “Underwriting Questions” link in the upper left of the policy window. Double-click on the second link named “Underwriting Questions” and then click “Edit”. There is a button at the bottom of the window which will allow the selection of question groups for various ACORD forms. In this case select the check box for ACORD 152 and then OK and the questions will be ready for your answers. Answer as appropriate and update. If the underwriting questions have downloaded or have been selected for this policy, then each appropriate section will have a Y or N filled on the form. Additional information supplemental to the question will need to be manually added to the form when it is created.

GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES	Y / N
1. EQUIPMENT RENTED, LOANED TO/FROM OTHERS WITH/WITHOUT OPERATORS?	<input checked="" type="checkbox"/> Y
2. IS APPLICANT OPERATING EQUIPMENT NOT LISTED HERE?	<input type="checkbox"/> N
3. PROPERTY USED UNDERGROUND?	<input checked="" type="checkbox"/> Y
4. ANY WORK DONE AFLOAT?	<input type="checkbox"/> N

Additional insured data (extra ACORD45’s as needed) – Any other additional interests on the policy will be selected and filled onto the form. After the three spaces on the 146 is filled, additional ACORD45’s will be created as needed so that all are included.

ADDITIONAL INTEREST

ACORD 45 Attached

INTEREST <input type="checkbox"/> LENDER'S LOSS PAYABLE <input checked="" type="checkbox"/> LIENHOLDER <input type="checkbox"/> LOSS PAYEE		NAME AND ADDRESS Belgrade State Bank First and Main PO Box 12 Sauk Centre MN 56378	RANK: _____ EVIDENCE: _____ CERTIFICATE: _____ POLICY: _____ SEND BILL: _____	INTEREST IN ITEM NUMBER LOCATION: _____ BUILDING: _____ SCHEDULE NUMBER: _____ ITEM NUMBER: _____ ITEM DESCRIPTION: CL Inland Marine Code - Contractors Equipment
REASON FOR INTEREST: _____		REFERENCE / LOAN #: _____ LIEN AMOUNT: _____	INTEREST END DATE: _____ PHONE (A/C, No, Ext): _____ E-MAIL ADDRESS: _____	
INTEREST <input type="checkbox"/> LENDER'S LOSS PAYABLE <input type="checkbox"/> LIENHOLDER <input type="checkbox"/> LOSS PAYEE		NAME AND ADDRESS 	RANK: _____ EVIDENCE: _____ CERTIFICATE: _____ POLICY: _____ SEND BILL: _____	INTEREST IN ITEM NUMBER LOCATION: _____ BUILDING: _____ SCHEDULE NUMBER: _____ ITEM NUMBER: _____ ITEM DESCRIPTION: _____
REASON FOR INTEREST: _____		REFERENCE / LOAN #: _____ LIEN AMOUNT: _____	INTEREST END DATE: _____ PHONE (A/C, No, Ext): _____ E-MAIL ADDRESS: _____	

Scheduled Equipment – items that are scheduled as a part of the INMRC policy or package will fill into this section. Scheduled items would be entered by adding an Inland Marine Risk. Once that risk is entered, you can access the scheduled items window by clicking in the upper left pane of the risk window.

Commercial Inland Marine Risk Information
 Miscellaneous Coverages
 Form Numbers
Scheduled Items

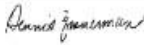
Customer Info Orbeck Bed and Breakfast
 Policy Info: 174606-08306293-17
 Package: CGL
 Location 1: 59195 910th St. Mountain
 Coverages
 Forms
 Package: INMRC
 Location 1: 59195 910th St Mountain L
 Coverages
 Inland Marine Risk 1: -
 Lienholder: Belgrade State Bank

Year	Model	Manufacturers Name	Liab. Limit	Value
Serial Number	Valuation Type	Capacity	Owned/Lease	New/Used
Description	Purchased Date	Valuation Date		
2010			7,000	0
	Replacemen		0	Owned
				New
Zipper Tractor w/ 18 HP Mower w/deck				
1978	Super M	Case IH	5,000	0
		Actual Cash	0	Owned
tractor with front end loader				

When this information is either downloaded or added manually it will fill as shown below. If there are more than 15 scheduled items, additional copies of page 2 of the form will be added and filled as needed.

SCHEDULED EQUIPMENT						% COINSURANCE
#	TYPE	DESCRIPTION	ID # / SERIAL NO.	NEW / USED	DATE PURCHASED	
1	Actual Cash Value	ZIPPER TRACTOR W/18 HP MOWER W/DECK				
	MANUFACTURER	MODEL	MODEL YEAR	CAPACITY	AMOUNT OF INSURANCE	
			2010		\$ 7,000.00	
2	Actual Cash Value	ZIPPER 22 HP MOWER W/DECK				
	MANUFACTURER	MODEL	MODEL YEAR	CAPACITY	AMOUNT OF INSURANCE	
			2011		\$ 8,000.00	
#	TYPE	DESCRIPTION	ID # / SERIAL NO.	NEW / USED	DATE PURCHASED	
	MANUFACTURER	MODEL	MODEL YEAR	CAPACITY	AMOUNT OF INSURANCE	
					\$	

Finally the signature as designated on the ACORD selection window will be included and the producer with that signature will be included. If a signature pad is utilized in the agency the applicant's signature can also be captured and placed on the form.

PRODUCER'S SIGNATURE 	PRODUCER'S NAME (Please Print) Dennis Zimmerman	STATE PRODUCER LICENSE NO (Required in Florida)
APPLICANT'S SIGNATURE	DATE	NATIONAL PRODUCER NUMBER