



Governed by Ohio School Officials for Ohio's Schools

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NEW BUSINESS APPLICATION
Property and Crime Coverage
(Including Inland Marine & Boiler and Machinery)

		PLAN USE ONLY	
School/Entity Name	_____	Entity Number	_____
Address	_____	App Submit Date	_____
City, State, Zip, County	_____	Submitted	_____
Website Address (URL)	_____	Need By Date	_____
Year Established	_____	Policy Type	_____
School/Entity Type	_____	Agent	_____

Contacts

Name	E-Mail Address	Position/Title	Contact For	Business Number	Fax Number
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Policy Term

Effective Date _____ Expiration Date _____

Educational Property Coverage Limits and Deductibles (Including Inland Marine & Boiler and Machinery)

Coverage	Limit	Deductible
Property Damage Per Occurrence <i>Total of all values shown on the SOV plus all values included in Additional Property section of this application.</i>	_____	_____
Accounts Receivable	_____	_____
Business Interruption/Rental Income Combined	_____	_____
Extra Expense	_____	_____
Perils – All Risk of Loss or Physical Damage		
Flood – Per Occurrence and Annual Aggregate	_____	_____
Earthquake Shock – Per Occurrence and Annual Aggregate	_____	_____
Terrorism – Per Occurrence and Annual Aggregate – For Property Damage, Business Interruption/Rental Income and Extra Expense	Include _____	Exclude _____
Boiler and Machinery Breakdown – For Property Damage, Business Interruption/Rental Income, and Extra Expense		Included

Coverage Extensions

Please indicate here if higher limits than the standard limits shown are needed.

Coverage	Limit	Coverage	Limit
Arson Reward	_____	Lock Replacement	_____
Demolition Cost	_____	Loss of Refrigeration	_____
Increased Cost of Construction	_____	Off Premises Services Interruption	_____

Errors and Omissions	_____	Personal Effects	_____
Expediting Expenses	_____	Property in Course of Construction and Additions	_____
Fire Fighting Expense	_____	Transit	_____
Fire Protection Devices	_____	Valuable Papers	_____

Property Conditions

Please indicate here if higher limits than the standard limits shown are needed.

Accidental Contamination	_____
Automatic Acquisition – Real Property	_____
Automatic Acquisition – Personal Property	_____
Back Up of Sewers or Drains	_____
Claim Preparation Expense	_____
Fine Arts – Unscheduled	_____
Furs, Jewelry, Precious Metals, Precious Stones – Separately	_____
Landscaping – Unscheduled	_____
Microorganisms – Per Occurrence and Annual Aggregate	_____
Miscellaneous Unscheduled Locations	_____
Natural and Artificial Turf Athletic Fields, Running Tracks and Paved Surfaces – Unscheduled	_____
Resulting Seepage and/or Pollution and/or Contamination	_____
Watercraft – 27 Feet or Less in Length – Unscheduled	_____
Contingent Business Interruption and/or Extra Expense and/or Rental Income	_____

Boiler and Machinery Breakdown Extension – Additional Perils/Coverages

Ammonia Contamination	_____
CFC Refrigerants and Halon	_____
Consequential Damage	_____
Hazardous Substance	_____
Media Coverage	_____
Ordinance or Law	_____
Utility Interruption	_____
Water Damage	_____

Additional Property

Coverage	100% of Values	Deductible	Actual Cash Value (ACV) Or Replacement Cost (RC)
Audio Visual Equipment	_____	_____	_____
Electronic Data Processing Equipment (<i>Computer Hardware</i>)	_____	_____	_____
Electronic Data Processing Media and Data Reproduction	_____	_____	_____
Miscellaneous Equipment	_____	_____	_____
Musical Instruments	_____	_____	_____
Scheduled Contractors Equipment (<i>Schedule only Heavy Construction or Road Equipment</i>)	See Contractors Equipment Schedule	_____	See Contractors Equipment Schedule

Comments, Additional Information and Requests for Property Coverage Not Otherwise Shown

Crime Coverage Limit and Deductibles

Coverage	Limit	Deductible
Employee Theft	_____	_____
Forgery or Alteration	_____	_____

Coverage

Inside the Premises – Theft of Money and Securities
Outside the Premises – Theft of Money and Securities
Computer Fraud

Limit	Deductible
_____	_____
_____	_____
_____	_____

Comments or Additional Information and Requests for Crime Coverage Not Otherwise Shown

Expiring Information

Has insurance/coverage been declined, cancelled or non-renewed for any of the coverages to which this application applies within the last 5 years?

Yes _____ No _____

If Yes, describe _____

Expiring Information for all coverages to which this application applies.

Carrier(s) _____

Limit(s) \$ _____

Deductible(s) \$ _____

Premium(s) \$ _____

Attach a copy of your current declarations page(s) if other than Ohio School Plan policy.

Coverage Information

PLEASE ATTACH THE FOLLOWING:

(1) A Statement of Values (SOV) including the Address, Occupancy, Protection Class, Coverage Values, and Valuation for each building owned or occupied by the School/Entity. (See the sample SOV as part of this application.)

(2) Five years of loss runs from prior carriers for any years not covered through the Ohio School Plan. The loss run reports should be no older than six months prior to the expiration date of the policy.

(1) and (2) must be received in order to provide a quote.

Exposures

Flood - Please respond to the following if requesting Flood coverage.

Do you have any buildings located in Flood Zone A?

Yes _____ No _____

If Yes, list the Location/Building numbers for the Statement of Values or the Building Name of each.

Have you experienced any incidents of flooding in the last four years?

Yes _____ No _____

If Yes, describe the location, the nature of the flooding and the date on which it occurred.

Schedules (Use Additional Pages if Necessary)

Additional Interests

Name	Address	City	State	Zip	Interest (Mortgagee or Loss Payee)	Description	Prem #	Bldg #

Scheduled Contractors Equipment

Description (Include Year, Make, Model and Serial #)	100% Value	Actual Cash Value (ACV) Or Replacement Cost (RC)

Statement of Values (SOV)

Complete the SOV below or an SOV with the equivalent information and submit by email, fax, upload or mail.

Prem /Loc #	Bldg #	Building Name	Occupancy	Address (No., Street, City)	Zip Code	County	Protection Class	# Stories	Square Feet	Yr Blt	Construction Code	100% Real Property Values	100% Personal Property Values	100% Property in the Open/ Misc Values	Specific Limit (If Applicable)	ACV or RC

Additional Building Detail – Section 1

Prem /Loc #	Bldg #	Building Name	Percentage of building covered by sprinklers	Sprinkler System Local or Central	CO2 System Local or Central	Fire Detection Local or Central	Smoke Detection Local or Central	Burglar Alarm Local or Central or Police	Manual Pull Alarms Yes/No	Dates of Addition to Bldg	Dates of Electrical Updates	Dates of Roofing Updates	Dates of HVAC Updates	Dates of Plumbing Updates	Describe Any Other Controls

Additional Building Detail – Section 2

Prem /Loc #	Bldg #	Video Surveillance Yes/No	If Yes, describe Video Surveillance	Is Bldg Vacant Yes,No	If Yes, describe Security for Vacant Bldgs	Is there protection of doorways Yes/No	If Yes, describe doorway protection	Is there protection of windows Yes/No	If Yes, describe window protection	Is there protection by motion detectors Yes/No	If Yes, describe motion detector protection	Is there protection of the building perimeter Yes/No	If Yes, describe perimeter protection

School/Entity's Attestation – The authorized signatory of this application attests to the best of his/her knowledge that statements made in this application, schedules and any attachments to the application are true; that no fact, circumstance or situation indicating the probability of a claim or action now known to any public official or employee has not been declared; and it is agreed by all concerned that omission of such information shall exclude any such claim. Signing of this application does not bind the signatory to purchase the coverage/insurance, but is agreed this form shall be the basis of the contract should a policy be issued.

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

Authorized Signatory for School/Entity

Date

Title

Phone Number