

FORTRESS INSURANCE AGENCY, INC.
PROPOSAL FOR JEWELERS BLOCK COVERAGE
 Fax: 310.320.1006 or E-mail: ccheng@go-fia.com

1. a. Corporation Name: _____
 b. Names of individual officers of corporation: _____
 c. Premise located to be insured: _____

2. a. Indication of % of sales other than retail _____% b. Number of Employees: _____

3. Latest three years of loss experience:

Year	Premium	Losses
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Name of Current / Prior Carrier: _____

5. Last 12 months, the estimated average daily Amount of other people's property in your care, custody Or control for any purpose whatsoever. \$ _____

6. Amount of revenue for the last 12 months \$ _____

7. Number of windows or show cases: _____

8. LIMITS OF INSURANCE DESIRED? a. Stock _____ (limit cannot be less than 80% of average inventory stock).

9. OPTIONAL DEDUCTIBLE? (\$500 is mandatory deductible), please chose if you want higher deductible;
 \$1,000 _____ \$5,000 _____ \$10,000 _____ \$Other _____

10. Inventory amount for the last 12 months \$ _____ Date taken: _____

11. Travel and Messenger coverage: \$ _____

12. BURGLARY PROTECTION OF PREMISES, SAFES and VAULTS: a. Cameras: _____ b. CCTV: _____ c. VCR: _____

d. Alarm Co: _____ e. Number of Safes: _____ f. % of goods kept in each safe: _____

Safe #1 Name of Safe _____ Safe #2 _____ Safe #3 _____
 Rating: _____ (e.g. TL-30, TL-15 etc) Rating: _____ Rating: _____

g. Hold up buttons: _____ h. Man trap Doors? _____ i. Buzzer Entry? _____