	AG) OR	iD.				ID SIGN :				LENENT	DATE	E (MM/DE	D/YY)		
Š		***************************************	lamed Insu						***	**						
		GLASS		,	SIGN		COMPANY USE									
\$			DED	FULL FORM COVERAGE												
RE	TENTI	ON	%	DEDUC	TIBLE CLA	AUSE									*****	
REM	BLDG	ITEM	# OF		PLATE SI	ZE	DESC	CRIPTION	l (In	ncl	lude lettering, and class)	LIST AND DOSITION IN DUIL DING		LIMIT	******	****
#	#	#	PLATES	LENGTH	WIDTH	AREA		ICATE IF	SA	AF	ETY GLASS	USE AND POSITION IN BUILDING	-	OF INSURA	NCE	
													\$	\$		
													\$;		
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REN	EM BLDG ITEM INSIDE/ # # DESCRIPTION (Neon, Elec								Me	ecł	hanical, Construction, Letteri	ng, Size, Etc.)		LIMIT OF INSURA	NCE	
													\$;		
													\$,		
					\$	\$										
													\$	3		
													\$;		
# EXPLAIN ALL "YES" RESPONSES										#	EXPLAIN ALL "YES" RES	PONSES			YES	NO
GLASS COVERAGE									+	8.						
1. ARE THERE ANY PAINTED PLATES (Partial/complete)?										9.						
2.												RAL INFORMATION FOR GLASS/SIGN COVER AREA LINDER CONSTRUCTION?	AGE			
3.	ANY OBSTRUCTION OR UNUSUAL SETTINGS?								+	10	J. IS THE BUILDING OR	ANLA UNDER CONSTRUCTION?		20 (0 15)		-

2. ANY PLATES FIXED, GLUED OR IN ANGLE SETTINGS?

3. ANY OBSTRUCTION OR UNUSUAL SETTINGS?

4. DOES APPLICANT WISH TO INSURE TAPE ON GLASS?

5. DOES APPLICANT WISH TO INSURE LETTERING ON GLASS?

6. BIS GLASS PROTECTED BY WIRE MESH OR U.L. APPROVED BURGLARY RESISTANT GLAZING MATERIAL?

7. IS ALL EXTERIOR GLASS ABOVE SECOND FLOOR?

10. IS THE BUILDING OR AREA UNDER CONSTRUCTION?

11. DOES GLASS OR SIGNS HAVE SCRATCHES, CRACKS OR DEFECTS? (Specify)

12. DID AGENT INSPECT SIGNS OR GLASS?

13. ARE ANY LOCATIONS WITH GLASS OR SIGNS VACANT?

SIGN COVERAGE

14. ANY SIGNS OFF PREMISES OR NOT ATTACHED TO BUILDING?