

Commercial Earthquake Quick Quote

complete *all* sections – one form per location



Agency/Contact: _____ Email: _____

Phone: _____ Fax: _____

Applicant Name: _____

Location Address: _____

Insured's Interest: Lessor Tenant Owner Occupant

Construction Class: (Check one) Wood Frame Brick Veneer Steel Frame Reinforced Masonry
 Tilt Up Reinforced Concrete

Year Built: _____ Number of Stories: _____ Square Footage: _____

Parking Class (Check one)

None Detached Attached no structure above Habitation Over Garage(HOG) Tuckunder 1-side
 Tuckunder 2-sides Full Subterranean Partial Subterranean First Floor Parking Soft First Floor

Occupancy: (Check one) Agri-Business School Service Restaurant Hotel / Motel
 Warehouse Apartment Manufacturing Wholesale Retail Office

Detailed description of occupancy type: _____

Building Shape: Regular Irregular Setbacks or Overhangs: Yes No

Requested Coverage:

Building \$ _____ (100% Replacement Cost Required)

BPP \$ _____ (100% Replacement Cost Required)

Tenant Improvements and Betterments \$ _____

Deductible Option: 2% 5% 7.5% 10% 15% 20%

Mold Clean-Up and Removal Coverage: \$10,000 (Building Only) Yes No

Earthquake Sprinkler Leakage: Yes No

Ordinance or Law: None 10% Sublimit 20% Sublimit

Flood Coverage: Yes No

Business Income/Extra Expense (provided on a *per location* basis): \$ _____ (for location)

Additional Property Coverage (APC) (provided on a *per location* basis): \$ _____ (for location)

Provide the amounts that equal the above APC: Pools \$ _____ Fences \$ _____ Paved Surfaces \$ _____

Fax to 925.947.3978 or email to pam_pearson@jebrown.net