



**American Exeer Insurance Services, Inc.**

DATE: \_\_\_\_\_ QUOTE NO: \_\_\_\_\_ SOURCE: \_\_\_\_\_

NAME OF THE OWNER \_\_\_\_\_ NATURE OF BUSINESS \_\_\_\_\_

NAME OF THE BUSINESS \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_ FAX NO. \_\_\_\_\_

WEB SITE \_\_\_\_\_ E-MAIL \_\_\_\_\_

WHAT DOES BEST DESCRIBE THE NATURE OF YOUR BUSINESS? \_\_\_\_\_

HOW LONG EXPERIENCE IN THIS LINE OF BUSINESS \_\_\_\_\_ YRS. IN BUSINESS \_\_\_\_\_ YRS. @ THIS LOCATION \_\_\_\_\_

EXISTING INSURANCE COMPANY \_\_\_\_\_ NO. OF YEARS WITH THIS CO. \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ NO. & AMOUNT OF LOSSES IN THE PAST 3 YEARS \_\_\_\_\_

NO. OF EMPLOYEES \_\_\_\_\_ AMOUNT OF PAYROLL \_\_\_\_\_ ANNUAL GROSS RECEIPTS \_\_\_\_\_

BUILDING CONSTRUCTION TYPE \_\_\_\_\_ TOTAL OCCUPIED AREA OF THE BUILDING \_\_\_\_\_

SPRINKLERD ? YES \_\_\_ NO \_\_\_ AGE OF THE BUILDING \_\_\_\_\_ ALARM SYSTEM? YES \_\_\_ NO \_\_\_

ALARM CO. CONTRACT & PHONE NO. \_\_\_\_\_

BUSINESS EXPOSURE NEXT TO THE PREMISES; LEFT \_\_\_\_\_ RIGHT \_\_\_\_\_ REAR \_\_\_\_\_

**COVERAGE REQUESTED**

G.L. LIMITS \_\_\_\_\_ CONTENTS \_\_\_\_\_ INVENTORY \_\_\_\_\_

LOSS OF EARNINGS \_\_\_\_\_ EQUIPMENT \_\_\_\_\_ PRODUCT LIABILITY \_\_\_\_\_

COMMERCIAL AUTO \_\_\_\_\_ EMPLOYMENT PRACTICE LIABILITY \_\_\_\_\_

EXCESS / UMBRELLA \_\_\_\_\_ PROFESSIONAL LIABILITY / E&O \_\_\_\_\_

WORKERS' COMP. \_\_\_\_\_ CLASS CODES: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

OTHER

INFORMATION \_\_\_\_\_

ADDITIONAL INSURED INTEREST: \_\_\_ OWNER: \_\_\_ MORTGAGEE: \_\_\_ A/I: \_\_\_

PROVIDE A/I EXACT: \_\_\_\_\_ FEID# : \_\_\_\_\_

1440 N. Harbor Boulevard, Suite 900, Fullerton, Ca 92835 Tel. (714)449-3379 Fax (949)222-9990 Lic.# 0D99291

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