COMMERCIAL PHYSICAL DAMAGE SCHEDULED UNITS APPLICATION

APPLICANT INFORMATION

NAMED INSURED

MAILING ADDRESS

CITY, STATE, ZIP

REQUESTED POLICY PERIOD	EFFECTIVE	EXPIRATION	☐ NEW ☐ RENEWAL

☐ INDIVIDUAL ☐ PARTNERSHIP ☐ CORPORATION	☐ LIMITED CORPORATION ☐ JOINT VENTURE ☐ OTHER	SIC	FEDERAL ID #

YEARS IN BUSINESS: _____

☐ NEW ENTITY (Attach Financials, Summary of Experience)

AGENT INFORMATION

AGENT NAME AND CONTACT

AGENCY NAME
Mobile Insurance Agency of Texas, Inc.

AGENT ADDRESS
25775 Oak Ridge Dr. Ste 110

AGENT CITY, STATE, ZIP
The Woodlands, TX 77380

CONTACT	PHONE (A/C, NO. EXT.)

EMAIL ADDRESS:

COVERAGES

POLICY FORM REQUESTED

☐ COMPREHENSIVE

☐ NAMED PERILS

EXCLUDED PERILS:

☐ Wind/Hail Exclusion - available in AZ, AR,CA,CO,ID,IL,IN,IA,MI,MN,MO,MT, NV,NM,ND,OH,OR,PA,SD,TN,UT,WY

☐ Flood Exclusion available in all states

☐ Wind/Hail/Flood Exclusion - available in states and counties listed on Seacoast Restrictions page in Underwriting Guideline Manual

DEDUCTIBLE OPTIONS (Apply Per Occurence/Per Location)

PER UNIT

Wind / Hail / Flood Perils

☐ $500 ☐ $5,000
☐ $1,000 ☐ $10,000
☐ $2,500 ☐ $25,000
☐ $50,000

AGGREGATE

☐ No aggregate
☐ 5 x aggregate
☐ 10 x aggregate

All Other Perils / BPP

☐ $500 ☐ $5,000
☐ $1,000 ☐ $10,000
☐ $2,500 ☐ $25,000
☐ $50,000

AGGREGATE

☐ No aggregate
☐ 5 x aggregate
☐ 10 x aggregate

☐ **ADDITIONAL DEBRIS REMOVAL**
$ _____ Limit

☐ **NON-OWNED UNITS DEBRIS REMOVAL**
$ _____ Limit

_____

UNDERWRITING INFORMATION - REFER TO GUIDELINES FOR COMPLETE ELIGIBILITY REQUIREMENTS

- SUBMIT PHOTO OF ANY UNIT OVER 10 YEARS OLD. **(DO NOT BIND)**
- SUBMIT PHOTO OF ANY UNATTACHED STRUCTURES WHOSE VALUE EXCEEDS UNIT VALUE. **(DO NOT BIND)**
- SUBMIT INVENTORY OF ANY BUSINESS PERSONAL PROPERTY WHERE VALUE EXCEEDS UNIT VALUE. **(DO NOT BIND)**
- ARE ANY UNITS LOCATED ON ANY ISLAND, LAND OUTSIDE THE INTERCOASTAL WATERWAY OR WITHIN 1000 FEET OF ANY TIDAL WATER OR LOCATED IN NFIP ZONE V, VI, OR V30? ☐ YES ☐ NO
- ARE ANY UNITS WITHIN 500 FEET OF A WATER EXPOSURE? ☐ YES ☐ NO
- HAS ANY LOCATION FLOODED WITHIN THE PAST 10 YEARS? ☐ YES ☐ NO
- ANY UNITS REPOSSESSED OR CONSIGNED? ☐ YES ☐ NO
- ANY UNITS MOTORIZED? ☐ YES ☐ NO
- ANY UNITS HAVE COMMERCIAL COOKING FACILITIES? ☐ YES ☐ NO
- ANY UNITS STORE ANY TYPE EXPLOSIVES, CORROSIVE OR FLAMMABLE LIQUIDS? ☐ YES ☐ NO
- ANY UNITS EQUIPPED WITH GOOSENECK COUPLING DEVICE? IF YES, DECLINE FOR COLLISION COVERAGE. ☐ YES ☐ NO
- ANY UNITS VACANT? IF YES, FOR HOW LONG? _____ ☐ YES ☐ NO
  WHEN IS UNIT EXPECTED TO BE OCCUPIED? _____
- ANY ATTACHED/UNATTACHED STRUCTURE NOT CONSTRUCTED OF STRONG DURABLE MATERIAL, UNDER CONSTRUCTION, INCOMPLETE OR NOT IN COMPLIANCE WITH LOCAL BUILDING CODE? ☐ YES ☐ NO
- ANY UNITS OR EXPOSURES PREVIOUSLY UNINSURED? EXPLAIN ☐ YES ☐ NO

LOSS HISTORY - Describe all losses to "MH" type units in last 3 years. ✔ None

DATE OF LOSS	DESCRIPTION OF LOSS	AMOUNT PAID
	New Purchase	

UNIT SCHEDULE	DESCRIPTION OF UNIT(S)					
	UNIT #1			UNIT #2		
YEAR / LENGTH / WIDTH	YEAR:	L:	W:	YEAR:	L:	W:
MANUFACTURER						
SERIAL NUMBER						
TIED DOWN	❑ YES ❑ NO			❑ YES ❑ NO		
PROGRAM	❑ RENTAL ❑ OFFICE ❑ MISC.			❑ RENTAL ❑ OFFICE ❑ MISC.		
Units written in Miscellaneous Program Describe Type and Usage						
FIREPLACE OR WOOD/COAL BURNING STOVE - (COMPLETE U0884)	❑ YES ❑ NO			❑ YES ❑ NO		
LOCATION - IN PARK, give park name and lot number	LOCATION:			LOCATION:		
IF OUT OF PARK, give complete address	PROTECTION CLASS: _____	❑ Protected* ❑ Unprotected**		PROTECTION CLASS: _____	❑ Protected* ❑ Unprotected**	
LENDER NAME & ADDRESS						
COVERAGES	LIMIT	PREMIUM		LIMIT	PREMIUM	
UNIT PHYSICAL DAMAGE (INCL. ATT'D STRUC.)						
UNATTACHED STRUCTURES						
BUSINESS PERSONAL PROPERTY						
LENDERS INTEREST	❑ INCLUDE			❑ INCLUDE		
LENDERS FLOOD	❑ INCLUDE			❑ INCLUDE		
TRIP COLLISION	EFF:			EFF:		
REPLACEMENT COST	❑ INCLUDE			❑ INCLUDE		

❑ COMPOSITE POLICY - Unit Schedule with 10 or more units, quarterly reporting (attach schedule of units).

* Protected - Means a "Rental" is located in a park (with 5 or more mobile homes in the park) and the park is located in Protection Classification 1-8

** Unprotected - Means a "Rental" is not in a park or the park is located in Protection Classification 9 or 10

Please complete this application and email to Service@mobileagency.com
or fax to 281-292-7429
or mail to
25775 Oak Ridge Dr. #110
The Woodlands, TX 77380

PRIOR CARRIER

Applicable to New York: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

APPLICANT SIGNATURE: _____ DATE: _____

PRODUCER SIGNATURE: _____ DATE: _____

Attach Unit Schedule for Additional Units or a typewritten Schedule with Information Shown Above.