

**ACE USA INTERNATIONAL ADVANTAGE®  
PROPERTY QUICK QUOTE APPLICATION**

CUSTOMER \_\_\_\_\_ BROKER/AGENT \_\_\_\_\_

ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_

QUOTE NEEDED BY \_\_\_\_\_ CONTACT \_\_\_\_\_

INTENDED INCEPTION \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

FAX \_\_\_\_\_

Coverages Requested     Building                       Personal Property  
                                  Boiler & Machinery             Business Income/Extra Expense

Description of Operations: \_\_\_\_\_

Loss Information Last 5 Years: \_\_\_\_\_

Current Carrier/Premium: \_\_\_\_\_

Deductible(s) Requested:     1,000     2,500     5,000     10,000     25,000

Perils:    All Risk                       All Risk including Flood and Earthquake

**SUBLIMITS:**    Earthquake \_\_\_\_\_                      Windstorm \_\_\_\_\_  
                         Flood \_\_\_\_\_

**SALESPERSON'S SAMPLES**

Description of Salesperson's Samples: \_\_\_\_\_

Salesperson's Samples Limit: \_\_\_\_\_

**TRANSIT**

Description of Goods: \_\_\_\_\_ Mode of Transportation: \_\_\_\_\_

Limit Requested: \_\_\_\_\_ Destination of Shipments: \_\_\_\_\_

Estimated Annual Number of Shipments: \_\_\_\_\_ Annual Value of Shipments: \_\_\_\_\_

**PROPERTY ON EXHIBITION**

Description of goods on exhibition: \_\_\_\_\_

Exhibition Limit: \_\_\_\_\_ Number of Annual Exhibitions: \_\_\_\_\_

Countries: \_\_\_\_\_

**CARGO**

Description of goods shipped: \_\_\_\_\_

Limit Requested: \_\_\_\_\_

Estimated Annual Number of Shipments: \_\_\_\_\_ Annual Value of Shipments: \_\_\_\_\_

Certificates Required:  Yes     No    If "yes" a separate marine product is required.

# LOCATION INFORMATION

(To be completed for each location to be insured or amend any spreadsheet to include all information)

## 1. INSURABLE VALUES

Building \_\_\_\_\_ (\$ value)

Machinery & Equipment \_\_\_\_\_ (\$ value)

Stock \_\_\_\_\_ (\$ value)

Merchandise \_\_\_\_\_ (\$ value)

Other Property \_\_\_\_\_ (\$ value)

Description of other property \_\_\_\_\_

Business Income including extra expense (Annual Values Only) \_\_\_\_\_ (\$ value)

Boiler & Machinery Sublimit \_\_\_\_\_ (\$ value)

## 2. Complete Location Address (including postal codes)

Address \_\_\_\_\_

City, State \_\_\_\_\_

Country, Postal Code \_\_\_\_\_

Country Tax ID \_\_\_\_\_

## COPE :

### Construction

-Year Built \_\_\_\_\_

-Type of Construction \_\_\_\_\_

-Type of Roof \_\_\_\_\_

### Occupancy

-Occupancy of building \_\_\_\_\_

-Number of stories \_\_\_\_\_ Is there a basement?  Yes  No

-Square Footage of building \_\_\_\_\_  Owned  Leased

-If warehouse occupancy verify if sole-occupant or multi-tenants.  sole-occupant  multi-tenants

-If multi-tenants, list other occupants \_\_\_\_\_

-If a manufacturing occupancy, describe manufacturing processes \_\_\_\_\_

### Protection

-Is the building sprinklered?  Yes  No

-What is the distance to the closest fire hydrant & fire station \_\_\_\_\_

-Other protection devices (fire alarm, burglar alarms, guards) \_\_\_\_\_

### External Exposure

-What are the nearest occupants that surround the building? \_\_\_\_\_

-Building Distance from the nearest body of water \_\_\_\_\_

Signed \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_