Missouri Property Insurance Placement Facility APPLICATION FOR DWELLING – COMMERCIAL – FARM (314)421-0170 e-mail uw@mpipf.com

PRODUCER INSTRUCTIONS - READ THIS FIRST INCOMPLETE APPLICATIONS WILL BE RETURNED

Please refer to the FAIR PLAN Producer Guide for help with completing applications. The guide can be found in the Producers tab at www.missourifairplan.com click on the highlighted "Producer's Guide".

FACILITY ACCOUNT

If this Facility has not assigned you an account number, please request one by calling the Facility or email uw@mpipf.com. Include a copy or your current Missouri property and casualty insurance license and a completed IRS form W-9. You may obtain this form from www.irs.gov.

LOCATION OF PROPERTY

Many applications are returned because of incomplete information to describe the "Location of Property". Properties that do not have a street address require the legal description (sec, township and range or lot and block number) city, county and zip code. A photo of the risk must be attached to ALL new applications. An appraisal must be attached for new purchases.

If questions on lines 30 and 31 are answered YES then the explanations are required.

Attach driving directions for all rural properties.

SIGNATURES ACCEPTED

The signature of the applicant is required. The producer cannot sign on behalf of the applicant without the applicant's prior written permission. Acceptable signatures are legal guardians or legal representatives, partners if partnership, corporate officer if a corporation.

DWELLING PROPERTY

Our limit of coverage for building and contents combined is \$200,000 per location.

If insuring contents coverage in a multiple family dwelling, the location must include floor and/or apartment number where the contents are located.

A ten (10) percent extension of coverage A is applicable to all outbuildings on the premises which are in good condition. Any additional coverage on outbuildings requires a photo and described on line 49 along with the amount of coverage requested.

Limited theft coverage for "On Premises" only is available by endorsement. To be eligible for the Theft Endorsement Extended Coverage and V&MM must be selected. Coverage range for Theft is a minimum \$1,000 to a maximum of \$25,000. See line 50.

COMMERCIAL PROPERTY

Our limit of coverage for building and contents combined is \$1,000,000 per location.

A declination from a standard market carrier for all commercial property is required. Failure to do so will delay the issuance of the policy.

A Class Rate Information form must be completed and submitted along with the application on all Commercial risks. Include information on all occupancies. The form may be found on our website. A photo of each building or structure is required.

If coverage is to be on contents only, the application must show the specific occupancy to be covered.

FARM PROPERTY

Our limit of coverage for building and contents combined is \$1,000,000 per location.

A declination from a standard market carrier for all farm property is required. Failure to do so will delay the issuance of the policy.

A Farm Property Schedule of Items form must be completed and submitted along with the application on all farm risks. The form may be found on our website. A photo of each building or structure is required. Each photo should be labeled to match the Property Schedule.

INQUIRES

To inquire about the status of the application please provide the name of the applicant or the application number listed on the quotation. You may also view your applications online by accessing your producer portal.

Missouri Property Insurance Placement Facility 906 Olive St – Suite 1000 St Louis MO 63101

THIS APPLICATION IS NOT A BINDER OF INSURANCE.

PRODUCERS DO NOT REPRESENT THIS FACILITY AND CANNOT BIND COVERAGE ON OUR BEHALF: SUBMIT AN APPLICATION FOR EACH FIRE DIVISION- EVERY ITEM MUST BE COMPLETED. "NA" IF NOT APPLICABLE

APPLICATION FOR (Check One) DWELLING COMMERCIAL (include Class Rate Information form) FARM (include form FM-01)

HAS APPLICANT PREVIOUSLY APPLIED TO THE FAIR PLAN FOR INSURANCE AT THIS LOCATION? 🛘 YES, 🗀 NO, REQUESTED FUTURE EFFECTIVE DATE 🔃 LOCATION OF PROPERTY 25. Seasonal Occupancy? Yes □ No □ 01. Indicate if ☐ Inside city limits ☐ Outside city limits 26. Farm (name principal crop or livestock) 02. Address, OR Section/Township/Range, OR Lot & Block Number 27. Are there Outbuildings? Yes \square No \square Condition? Good \square Poor \square 28. Is this application for new construction? Yes \square No \square 03. City County 29. If yes, has any part of the building been started? Yes \Box No \Box What is the expected completion date? APPLICANT'S NAME AND MAILING ADDRESS 30. Is any part of the building vacant or unoccupied? Yes ☐ No ☐ If Yes, what percentage, reason, and how long? 04 Name 05 Name 31. Has applicant or any other party with interest in this property had a fire loss to any 06 Number and Street or P O Box Number 07. City, State, Zip Owner Occupied ☐ Tenant Occupied 08. Occupancy is: 32. No of Families? 1 \square 2 \square 3 \square 4 \square 5 \square More than five \square 09. Escrowed? Should Mortgagee Co be billed? \qed YES \qed NO 33. If this is a dwelling application, is there a business being operated on the premises? NAME(S) AND ADDRESSES OF MORTGAGEE(S) Yes No If yes describe business. (FARM complete form FM-01, COMMERCIAL complete Class Rate Information form) 10. Name of first Mortgagee Dwelling Commercial 34. Construction Type (Select One) Construction Type (Select One) 11. Address 1. Frame (not otherwise classified) 8. Frame 2. Veneer (Brick, Stone or Masonry) 9. Brick 12. City, State, Zip 3. Brick, Stone or Masonry 10. Noncombustible 4. Fire Resistive 11. Masonry Noncombustible Aluminum or Plastic siding over frame 12. Modified Fire Resistive Mobile Home on Enclosed Masonry Foundation 13. Fire Resistive 14. Name of second Mortgagee 35. Mobile Home Serial No. Year Brand Length Width 16. City, State, Zip 36. Protection Class (if known) 17. Loan# 37. Feet from Fire hydrant?_____ Miles from Fire Dept?___ 38. Servicing Fire Dept. NAME AND PHONE # OF PERSON INSPECTOR CAN CONTACT If F D is a subscription Fire Dept does applicant subscribe? Yes \(\Bar{\cup} \) No \(\Bar{\cup} \) 18. Name 39. Market value of property? Bldg \$_____Contents \$____ 9. Daytime phone number _ No \square 40. Wood/Coal burning stove? Yes □ PRODUCER AND/OR AGENCY INFORMATION 41. What kind of material does the stove base consist of?____ 20. Name ____ 42. What is the distance from the stove to the rear wall? 21. Address 43. What is the distance from the stove to the side wall? 22. City, State, Zip ___ 44. Date of Purchase of building (if building coverage) 23. MPIPF Account number 45. Was the property (check one) purchased □, inherited □, gifted □ other 24. Signature 46. Purchase price \$ Alterations or improvement \$ AMOUNT OF INSURANCE, COVERAGES AND DEDUCTIBLE AMOUNT CHECK IF DESIRED: ☐ EC ☐ EC & V & MM ☐ ON PREMISES THEFT (DWELLING ONLY) CO-INSURANCE COMMERCIAL ONLY 51. Outdoor radio/TV equipment? Yes □ No □ Amount of insurance \$ 52. Awnings/signs/canopies? Yes \square No \square Amount of insurance \$ 47. Building \$ 48. <u>Contents</u> \$ ____ 53. Deductible amount requested \$ % Describe 49. Other \$ ___ Limit: Minimum \$1,000 - Maximum \$25,000) Must have EC & V&MM to be eligible for Theft Endorsement. 50 Dwelling Theft \$__ MANDATORY DISCLOSURE OF EXCLUDED COVERAGES The following coverage's are not provided: for loss by flood, earthquake and/or back-up of sewer drains or sumps or any combination of these. NOTICE: FAILURE TO ANSWER THE QUESTIONS PROPERLY COULD RESULT IN VOIDANCE OF CONTRACT! I certify the above information to be true and correct to the best of my knowledge. SIGNATURE OF APPLICANT ONLY DATE PHONE NUMBER

E-MAIL ADDRESS

FAC 1 (ed 12//16)