

Property/Liability Insurance Application For Self Service and Exterior Only/Conveyor Car Washes

Property and liability coverage is required at all locations

THIS APPLICATION CANNOT BE PROCESSED WITHOUT TWO PHOTOGRAPHS OF THE CAR WASH. A SEPARATE APPLICATION IS REQUIRED FOR EACH ADDITIONAL LOCATION TO BE INSURED.

GENERAL INFORMATION	Contact Name	Date			
Business Legal Name:			Ef	fective Date:	
Mail Address:	Ci	ty	County	State	Zip
Location Address:	Ci	ty	County	State	Zip
Telephone #:	Fax #:		Email Address: _		
FEIN:Inc	dividualPartnership	Corporation	LLCOt	her (specify)	
Interest: Owner Ter	nant What percentage c	of building is owne	r occupied? 100%	5 75-99%	less than 75%
Number of years in Car Wash Busir	ness: If less than 3	years provide prie	or business experi	ence:	
Does named insured have ownersh	ip interest in any other bu	usiness? If yes, de	escribe operation,	name,relationship	percentage of
ownership, location address for othe	er business:				

ENTER ALL CLAIMS AND OCCURRENCES FOR THE PRIOR 3 YEARS

Attach Loss Run / History

Date of Occurrence	Type/Description Occurrence or Claim	Date of Claim	Amount Paid

TYPE OF CAR WASH

Self Service (In-Bay Automat	ics and Self-Serve Bays)			
Number of <u>Self-Serve Bays</u> :	Are bay floors heated?	Snow remo	oval contract with risk trai	nsfer?
Triggers on wands?				
Number of In-Bay Automatics:	Type: Touchless	Brush	Soft Cloth	
Hours of Operation	Number of Employees	Do you have	Workers Compensation i	nsurance?
Exterior Only (Exterior Only 0	Conveyor Tunnel – Customer remair	is in car)		
Number of exterior only tunnels:	Type: Touchless	Brush	Soft Cloth	Combo
Hours of Operation	Number of Employees	Do you have V	Norkers Compensation in	nsurance?

UNDERWRITING AND COVERAGE INFORMATION

Other Drofit Contore lindicate these and include			
Other Profit Centers [indicate those applicable]			
Detailing (# of vehicle detailed per month) Dog Wash		air Lube ehicle Fleet Contracts	Windshield Emissions
Mini-Storage		e (Describe)	
Auto Sales Lease/Rental Tow			
Year building constructed: If building ov Age of Car Wash Equipment: If older than		•	ngPlumbingRoof
Building Construction:F = Frame - wood,	stucco JM = Joisted	Masonry - block, brick,	concrete walls with wood truss roo
NC = Noncombustible-metal on metal	_MNC = Masonry Non-com	bustible - block walls w	rith metal truss roof
Property limit: Replacement Cost	Building 1	Building 2	Vacuum/Canopy Isle
Building Square Footage			
Building Value	\$	\$	\$
Equipment Value	\$	\$	\$
Contents (other than equipment)	\$	\$	\$
	\$		
Free Standing Signs			noe) describe
Other Structures (Describe) Additional Interests:Mortgagee	Loss Payee	Additional Insure	·
Other Structures (Describe)	Loss Payee	Additional Insure	·
Other Structures (Describe) Additional Interests:Mortgagee	Loss Payee City, State, Zip Code and C	Additional Insure	ecl
Other Structures (Describe) Additional Interests:Mortgagee Additional Interest name and address (Street, C	Loss Payee Dity, State, Zip Code and C	Additional Insure ounty) 	ecl
Other Structures (Describe) Additional Interests:Mortgagee Additional Interest name and address (Street, C	Loss Payee City, State, Zip Code and C CentralLo ocks?Premises w	Additional Insure ounty) cal Surveil rell lit?	lance cameras?
Other Structures (Describe) Additional Interests:Mortgagee Additional Interest name and address (Street, O Are premises protected by alarm system? Do exterior doors have double cylinder dead bolt le	Loss Payee City, State, Zip Code and C CentralLo ocks?Premises w I changers well lighted and	Additional Insure ounty) calSurveil rell lit? easily observed from s	ed
Other Structures (Describe) Additional Interests:Mortgagee Additional Interest name and address (Street, O Are premises protected by alarm system? Do exterior doors have double cylinder dead bolt le Do you accept credit/debit cards? Are bil	Loss Payee City, State, Zip Code and C CentralLo ocks?Premises w I changers well lighted and sh kept overnight?	Additional Insure ounty) cal Surveil rell lit? easily observed from s Frequency of deposi	ed
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Other Structures (Describe) Additional Interests: Mortgagee Additional Interest name and address (Street, O	Loss Payee City, State, Zip Code and C Central Lo ocks? Premises w I changers well lighted and sh kept overnight? If so, do you ve	Additional Insure ounty) calSurveil rell lit? easily observed from s Frequency of deposi rify auto insurance and	ed
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than you in connection with this application for insurance and subsequent policy renewals. Such information as well as other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties without your authorization. You have the right to review your personal information in our files and can request correction of any inaccuracies. A more detailed description of hyour rights and our practices regarding such information is available upon request. Contact your agent or broker for instructions on how to submit a request to us. ACORD 125 (2005/06)

This application does not bind the applicant, the company, or the agent to complete the insurance, but it is agreed that the information contained herein shall be the basis of the contract should a policy be issued.

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Visit our web site at www.carwashinsurance.com • Email us at cwspecialists@carwashinsurance.com