

POLICY #:

CLASSIFICATION RESPONSES

- 8. DATE OF LOSS: _____ TYPE OF LOSS: _____ AMOUNT PAID: \$ _____
 DATE OF LOSS: _____ TYPE OF LOSS: _____ AMOUNT PAID: \$ _____
- 9. DESCRIBE ANIMALS: _____ PET OR GUARD DOG? _____ HOW MANY? _____
 IF ANY OF THE FOLLOWING ANIMALS: Rottweilers, Pit Bulls, Wolves, Wolf Hybrids, Dobermans, Akitas, or any other potentially fierce breed of dog, exotic animals (including but not limited to: Snakes, Ostriches, Tigers, Monkeys, and Llamas) or, insured's that own or board more than 2 horses, or any animal with a previous history of causing bodily harm or injury. Animal Exclusion Endorsement #A4546E0401 is available to restrict liability.
APPLICANT SIGNATURE FOR ANIMAL EXCLUSION ENDORSEMENT #A4546E0401 X _____
- 10. NAME OF COMPANY: _____ REASON: _____
 OTHER REMARKS: _____
- 13. IS THERE A FENCE AROUND THE SWIMMING POOL MADE OUT OF SUITABLE MATERIAL TO A HEIGHT OF AT LEAST 4½ FEET? YES NO
 DOES THE FENCE HAVE A SELF-CLOSING GATE? YES NO IS IT AN ABOVE GROUND POOL? YES NO IF YES, VALUE: \$ _____

USE THIS AREA TO EXPLAIN UNDERWRITING INFORMATION, LIST ADDITIONAL APPLICANTS OR LIENHOLDERS, AND FOR GENERAL COMMENTS OR INSTRUCTIONS.

CALIFORNIA EARTHQUAKE COVERAGE

Your policy does not provide coverage against the peril of Earthquake.

California law requires that earthquake coverage be offered to you at your option.

Warning: These coverages may differ substantially from and provide less protection than the coverage provided by your homeowners' insurance policy. There are exclusions and limitations such as outbuildings, swimming pools, masonry fences, and masonry chimneys. This disclosure form contains only a general description of coverages and is not part of your earthquake insurance policy. Only the specific provisions of your policy will determine whether a particular loss is covered and, if so, the amount payable.

The coverage, subject to policy provisions, may be purchased at additional cost on the following terms:

- A. Amount of dwelling coverage: _____
- B. Applicable deductible: _____ If your loss is below, this amount, you may not receive any payment from your coverage.
 Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage, or the replacement value of your coverage.
- C. Contents Coverage: _____
 If your loss does not exceed the deductible for the dwelling, you will not receive any payment for this coverage.
 Your insurance company or agent will provide written notice as to how the deductible applies to the amount you receive pursuant to this coverage.
- D. Additional living expenses: _____
- E. Rate or premium: \$ _____

You must ask the company to add earthquake coverage within 30 days from the date of mailing of this notice or it shall be conclusively presumed that you have not accepted this offer.

This coverage shall be effective on the day your acceptance of this offer is received by us.

Signature Date

I DO NOT WISH TO PURCHASE EARTHQUAKE COVERAGE AND I UNDERSTAND THAT I DO NOT HAVE EARTHQUAKE COVERAGE.

Signature Date

FRAUD WARNING: For your protection California law requires the following to appear on this form: Any person who knowingly presents false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

PRIVACY POLICY
I have received and read a copy of the Company's Privacy Policy. By submitting this application, I am applying for issuance of a policy of insurance and, at its expiration, for appropriate renewal policies issued by the Company. I understand and agree that any information about me that is contained in, or that is obtained in connection with, this application of any policy issued to me may be used by the Company to issue, review, and renew the insurance for which I am applying.

FAIR CREDIT REPORTING ACT NOTICE: This notice is given in compliance with the Federal Credit Reporting Act (Public Law 91-508). As part of our underwriting procedure, a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.

SUBAGENT NAME / SIGNATURE	DATE	APPLICANT SIGNATURE X
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APPLICATION MUST BE SIGNED!