



[COMPANY NAME]

A stock company
1271 Ave of the Americas, FL 37, New York, NY 10020

**COMMERCIAL PROPERTY
DECLARATION**

POLICY NO.
NEW or RENEWAL OF:

NAMED INSURED AND MAILING ADDRESS

[Empty box for Named Insured and Mailing Address]

PRODUCER MAILING ADDRESS

[Empty box for Producer Mailing Address]

POLICY PERIOD: FROM [] TO [] AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

THE NAMED INSURED IS :

BUSINESS DESCRIPTION :

PREMISES No.:

BUILDING No.:

DESCRIPTION OF PROPERTY AT YOUR PREMISES
ADDRESS:
OCCUPANCY:
PROTECTION CLASS: **CONSTRUCTION:**

COVERAGES PROVIDED

INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH AN AMOUNT OF INSURANCE IS SHOWN

COVERAGE	COVERED CAUSE OF LOSS	DEDUCTIBLE	COINSURANCE	LIMIT OF INSURANCE
	[Covered Cause of Loss]	[Deductible]	[Coinsurance]	[Limit of Insurance]
Prem. No. / Bldg. No.				
Building				
[Applicable Building Coverages]				
PERSONAL PROPERTY COVERAGE(S)				
Business Personal Property				
[Applicable Business Personal Property Coverages]				

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PRODUCER:

Business Income (With Extra Expense)	[Covered Cause of Loss]	[Deductible]	[Coinsurance]	[Limit of Insurance]
[Applicable Business Income Coverages]				
Extra Expense	[Covered Cause of Loss]	[Deductible]	[Coinsurance]	[Limit of Insurance]
[Applicable Extra Expense Coverages]				
SPECIAL CLASS COVERAGE	[Covered Cause of Loss]	[Deductible]	[Coinsurance]	[Limit of Insurance]
[Applicable Special Class Coverages]				

[GLASS COVERAGE]		
Additional Interest	Name	Address

Prem. No. / Bldg. No. [Mortgageholders]		
MORTGAGEHOLDERS E&O COVERAGE	# of Mortgages	Limit Per Mortgage
	no	\$

[OPTIONAL COVERAGES]		
[BUILDING]	LIMIT	FORM
Prem. No. / Bldg. No. [Applicable Optional Building Coverages]		

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[OPTIONAL COVERAGES]		
[PERSONAL PROPERTY]	LIMIT	FORM
[Applicable Optional Personal Property Coverages]		
[BUSINESS INCOME]	LIMIT	FORM
[Applicable Optional Business Income Coverages]		
[EXTRA EXPENSE]	LIMIT	FORM
[Applicable Optional Extra Expense Coverage]		

[WINDSTORM AND HAIL]		
Minimum Per Occurrence Deductible:		
Annual Aggregate Deductible :		
PREM No.	BUILDING No.	DEDUCTIBLE
BUSINESS INCOME	Increased Waiting Period of Restoration:	<
EXTRA EXPENSE	Increased Waiting Period of Restoration:	

[PROPERTY ONE COVERAGE]	[LIMIT]

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[EQUIPMENT BREAKDOWN COVERAGE – PROPERTY PROGRAM PERFORMANCE]

Equipment Breakdown Limit:

Deductibles

Combined, All Coverages	Comb Ded – All Cvg
Direct Coverages	Ded – Direct Coverages
Indirect Coverages	Ded – Indirect Coverages or Ded - Hours <i>hrs.</i> or <u>DedADV times ADV</u>
Spoilage	Spoilage_Limit or Spoilage_%_Loss% of loss, Spoilage_Limit_Min <i>minimum</i>

Other Conditions

Other Deductible:
Other Description:

Other Conditions Information :

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[EARTHQUAKE - VOLCANIC ERUPTION COVERAGE SCHEDULE]	
Property Damage Deductible	\$
Earthquake Sprinkler Leakage Only	<input type="checkbox"/>
Earthquake Sub-Limit	\$

Earthquake – Volcanic Eruption Limits and Deductibles apply to all premises/buildings on this policy except for the following

Premises _____, Building _____

The premises/buildings listed above are excluded from Earthquake Coverage

Earthquake Sprinkler Leakage only applies to all premises/buildings on the policy listed below

Premises _____, Building _____

The premises/building listed above are included with Earthquake Sprinkler Leakage Only coverage

[EARTHQUAKE SUB-LIMIT BLANKET SUMMARY:]			
BLANKET ID:		LIMIT:	\$ _____
PREMISES No.	BUILDING No.	COVERAGE	

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[FLOOD COVERAGE]

Inception Date

NOTE: There is no coverage for a Flood that begins before or within 72 hours after this date. Refer to Section **D.5.a.** of the Endorsement for additional information.

Flood Deductible \$

No-Coinsurance Option

Annual Aggregate Limit \$

NOTE: Refer to the Limit of Insurance provisions in the Endorsement for an explanation

Underlying Insurance Waiver

NOTE: Refer to Section **I.1.** of the Endorsement for an explanation of this option.

Other Flood Insurance Description: NFIP

Description Of Covered Personal Property In The Open:

Flood Limits and Deductibles apply to all premises/buildings on this policy except for the following

Premises , Building

The premises/buildings listed above are excluded from Flood Coverage

[ELECTRONIC COMMERCE ENDORSEMENT] **[AMOUNT]**

[ELECTRONIC DATA]	[LIMIT OF INSURANCE]

[MISCELLANEOUS COVERAGE – POLICY]		
COVERAGE	DEDUCTIBLE	LIMIT OF INSURANCE

[TERRORISM RISK INSURANCE ACT IS INCLUDED] [Amount]

[MINE SUBSIDENCE PREMIUM:] [Amount]

TOTAL COMMERCIAL PROPERTY PREMIUM \$

TOTAL PREMIUM **\$**

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FORMS AND ENDORSEMENTS

APPLYING TO COMMERCIAL PROPERTY AND MADE PART OF THIS POLICY AT TIME OF ISSUE:

See Forms Schedule

NOTE: IF NO ENTRY APPEARS ON THE ABOVE ENDORSEMENTS, INFORMATION REQUIRED TO COMPLETE THE FORM WILL BE SHOWN ON THE SUPPLEMENTAL FORM DECLARATION.

THESE DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND ENDORSEMENTS, AND SUPPLEMENTAL FORM DECLARATION(S), IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY