



Umbrella — Application

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305 17th Street, Huntington Beach, CA 92648

Personal Information:

First Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ ZIP: _____

Telephone Number: _____ Fax Number: _____

E-mail Address: _____ How did you find us?: _____

Mailing Address (if different than above)

Address: _____ City: _____ State: ____ ZIP: _____

Umbrella Information:

Liability limit: _____

Retained limit: _____ (similar to a deductible)

Add excess uninsured/underinsured motorist: _____

Vehicle Information: *Motorized vehicles owned by, leased by or provided to any member of the household:*

Primary automobile liability limits: _____

Any non-standard auto policies in effect? _____

Number of Autos: _____

Number of company provided vehicles: _____

Number of motorhomes: _____

Number of Motorcycles licensed for road use: _____

Number of off-road vehicles: _____

Number of antique vehicles: _____

TOTAL number of vehicles: _____

Driver / Operator Information:

Number of youthful operators: _____ (under 25 years old)

Number of over age operators: _____ (over 75 years old)

Number of excluded operators: _____

TOTAL number of operators: _____

Watercraft Information: *Includes personal watercraft, powerboats and sailboats:*

Number of watercraft under 26 ft. in length **and** an inboard motor over 50 HP: _____

Number of watercraft over 26 ft. in length **or** over 200 HP: _____

Property Information:

Personal liability limit: _____

Number of owner-occupied residences: _____

Number of secondary or vacation residences: _____

Number of residences rented to others: _____

Any vacant land? _____

Any in-home business? _____

Incidental farm coverage: _____

Miscellaneous Information:

Current Insurance Company: _____

Expiration Date: _____ Current Premium: \$ _____

Questions or Comments to help the Agent: