



Mason & Carter, Inc.

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Return completed form to
rcarter@masoncarter.com

NEW COMMERCIAL BUSINESS INFORMATION SHEET

NAMED INSURED: _____ DBA (optional): _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Phone#: _____ Email: _____ Year Established: _____

Description of Operations: _____

Check here if location address is the same as mailing address: _____

Location Address (if different): _____ State: _____ ZIP: _____

Are you a tenant or building owner? _____

Are you the only occupant in the building? _____ If multiple, list all occupancies below:

Year building was built: _____ Square Footage Occupied: _____ Total Square Footage of Building: _____

Levels below ground: _____ # of Total Stories: _____ Near Fire Hydrant (ft): _____ Nearest Fire Dept (miles): _____

Location Sprinklered? _____ If YES, what % sprinklered: _____ Roof type: _____

Burglar Alarm System? _____ If YES, central alarm monitoring system? _____

Heating boiler on premises you are responsible for? _____ If YES, insurance placed elsewhere for boiler? _____

<p>BUILDING CONSTRUCTION TYPE: Frame – Walls are constructed of wood or other combustible materials, including when combined with other materials such as Brick, Veneer, Stone Veneer, Wood Ironclad on Wood Masonry Joist – Walls are constructed of masonry materials such as Clay, Adobe, Brick, Gypsum Block, Cinder Block, Hollow Concrete Block, Stone, Tile, Glass Block or other similar material and where the floors and/or roof are combustible Noncombustible – Walls/Floors/Roof are constructed of and supported by Metal, Asbestos, Gypsum or other non-combustible material Masonry Noncombustible – Walls are constructed of masonry materials of the type described N masonry joist above but with a floor and roof constructed of metal or other non-combustible material Fire Resistive – Walls/Floors/Roof are constructed of fire resistive materials having a resistance rating of not less than two (2) hours</p>
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Year of last improvements for the following systems:			
Roof:	Plumbing:	Heating:	Electrical:

Gross annual sales (\$): _____

Full Time Employees: _____ # Part Time Employees: _____ Annual Payroll (\$): _____

Business Personal Property Limit (\$): _____ Building/Improvements and Betterments Limit (\$): _____

Additional Info: