PH: 800-654-4056	Stroud National Agency, Inc.	
FX: 575-258-4413	Commercial Lines	
www.stroudga.com	Quote Request	
	Rev 0913.22	
Date:	Proposed Effective Date:	
Agency/Agent Info		
Name:	Agent Code:	
Phone:	Fax:	
Contact:	Email:	
Applicant Info		
County:	Phone:	
Type of Risk:		
Federal ID:		
	Corporation Individual Ltd. Liability Corp (LLC)	
Ltd. Liability P	artnership (LLP) Partnership Ltd. Partnership (LP)	
Joint Venture	Trust or Estate Other:	
Year business established or acc	quired: Annual Receipts:	
Number of Employees (full and pa	rt time): Payroll:	
Current Insurance Coverage YES	NO Expiration Date:	
	Amount Paid	
	Amount Faid	
General Operations		
Hours of operation: No later than 10pmNo	o later than Midnight No later than 2am Past 2am	_24 Hours
Open a minimum of eight months	a year: Yes No	
Operations are subcontracted or su	bcontractors hired for service, maintenance or repair:Yes	_ No
o If yes, Subcontractors required to	o provide proof of General Liability limits at least equal to the applicant's: _	YesNo
o Independent contractors and sub-	contractors required to provide proof of WC insurance:YesNo	

## Stroud National Agency, Inc.

Commercial Lines Quote Request

Property Coverage (All buildings must be insu	red to 100% replacement	nt cost value)		
Location Street Address:		, City		
State		Zip Code		
Building Value: \$ Total Square Fo	ootage: Y	ear Built:	BPP:	
TEXAS MUST HAVE A LEAD FREE CERTIFICA	TION FOR ANY BUILDIN	G BUILT PRIOR TO 19	979	
Type of Construction:	_ Number of stories:	Age of I	Roof:	
Emergency lighting is installed and operational:	Yes No			
Exits are properly lit and equipped with panic ha	rdware: Yes	No		
Percentage of building with sprinklers: 100	% 80% to 99%	80%	None	
If "100%" or "80 to 90%", indicate sprinkler	system type: Life Safet	y only Automatic Fire	e Protection/Extinguishing	
If Automatic Fire Protection/Extinguishing syste	m is selected, confirm	the following:		
This building has a fully functioning automa of the building area : Yes No	ic fire protection or exti	nguishing sprinkler s	ystem covering 80-90%, or 100%	
Sprinkler system installed for present occupancy	Yes No			
Fire Alarm: Local Monitored	None			
Restaurants & Stores				
Total annual sales: \$				
Sales dollars from: Food \$ Alcohol				
Street vending \$ Banquet/Recept	on Services \$	Sold by Inte	rnet/Mail order \$	
Used merchandise \$ Own label \$	Whole	esale \$	Rentals \$	
All hoods, ducts, grease filters, deep fryers and s extinguishing system serviced every 6 months.	<b>e</b>	nent are protected b	y a UL listed automatic fire	
Automatic high temperature shut offs are on all c	leep fat fryers: Y	Yes No		
Ineligible operations, products, or services (the	ere may be more based	d on state and type	of coverages)	
• Armed security guards.		• Manufacturing of products, including mixing, blending,		
• Alarms or security systems, system design, service or insta	allation.	repackaging, relabeling or direct importing.		
• Businesses open past 2 a.m.		<ul> <li>Med spa treatments such as injectables (e.g., Botox®, JUVÉDERM®), lasers, dermabrasion, chemical peels, hair</li> </ul>		
• Freight forwarders.	-	transplants, etc. See Med spas in Office Pac.		
• Karaoke production or equipment, music or machine design, sales, service or installation.		• Operating, hiring, leasing, or owning aircraft or watercraft for business use.		
Marijuana processing, handling or distribution.		• Software design – see Technology Office Pac		