

# National Casualty Company

Madison, Wisconsin

Property/Casualty Home Office

8877 North Gainey Center Drive • Scottsdale, Arizona 85258

1-800-423-7675 • Fax (480) 483-6752

A Stock Company

## PERSONAL UMBRELLA APPLICATION

<b>NAME</b>	Last	First	Middle	Producer _____
	Number & Street	City	State	Producer Code _____
<b>ADDRESS</b>			Zip	Agt/Brkr Lic. No. _____
	Number & Street	City	State	Office Address _____
<b>GARAGING ADDRESS</b> (if different)			Zip	_____
				City _____
<b>POLICY PERIOD</b>	From	To	Renews Policy No.	Tel. _____
	/ /	/ /		Fax _____

### UMBRELLA INFORMATION:

COVERAGES		PREMIUMS		CALCULATIONS
Application for Primary Umbrella	<input type="checkbox"/>	BASIC	\$	
Application for Excess Umbrella	<input type="checkbox"/>	RESIDENCES	\$	
POLICY AMOUNT	RETENTION	AUTOMOBILES	\$	
\$	MILLION	RECREATIONAL VEHICLES	\$	
		WATERCRAFT	\$	
OPTIONAL COVERAGES TO APPLY:		OTHER	\$	
_____		TOTAL	\$	

### PRIMARY POLICY INFORMATION:

TYPE OF POLICY	COMPANY/POLICY NO.	POLICY PERIOD	LIMITS OF LIABILITY	
			BODILY INJURY	PROPERTY DAMAGE
AUTOMOBILE				
PERSONAL LIABILITY				
WATERCRAFT				
RECREATIONAL VEHICLE				
UNDERLYING UMBRELLA			\$	MILLION

### OPERATOR INFORMATION:

LIST ALL MEMBERS OF THE HOUSEHOLD AND ALL OPERATORS OF THE VEHICLES/WATERCRAFT AS REQUIRED BY COMPANY

#	NAME	DRIVERS LICENSE NO.	STATE	DATE OF BIRTH	VEHICLE, WATERCRAFT % USE, ETC.	MINOR VIOL. 3 YEARS	MAJOR VIOL. 3 YEARS	ACCO 3 YEARS
1								
2								
3								
4								
5								
6								

<b>REAL ESTATE:</b>										
LIST ALL OWNED, LEASED OR OCCUPIED RESIDENCES, BUILDING, FARMS, VACANT LAND, ETC.										
#	LOCATION			DESCRIPTION			NO. UNITS/ ACRES	YEAR BUILT	OCCUPANCY	
1										
2										
3										
<b>AUTOMOBILES:</b>					<b>RECREATIONAL VEHICLES:</b>					
LIST ALL AUTOS OWNED, LEASED					LIST MOTORCYCLES, SNOWMOBILES, DUNE BUGGIES, MINIBIKES, ETC.					
#	YEAR	MAKE & MODEL			#	YEAR	MAKE & MODEL			
1					1					
2					2					
3					3					
<b>WATERCRAFT:</b>										
LIST ALL WATERCRAFT OWNED, LEASED, CHARTERED OR FURNISHED FOR REGULAR USE										
#	YEAR	TYPE, MANUFACTURER, MODEL	LENGTH	H.P.	MAX SPEED	<input type="checkbox"/> COST NEW	<input type="checkbox"/> CUR. VALUE	WATERS NAVIGATED		
1			FT.							
2			FT.							
<b>EMPLOYMENT:</b>										
OCCUPATION:					EMPLOYER'S NAME & ADDRESS					
SPOUSE'S OCCUPATION:					EMPLOYER'S NAME & ADDRESS (If not employed, so indicate)					
OTHER OPERATOR'S OCCUPATIONS:					EMPLOYER'S NAME & ADDRESS (If not employed, so indicate)					
<b>PRIOR EXPERIENCE:</b>										
HAS ANY LOSS OCCURRED ON ANY PRIMARY OR EXCESS POLICY, EXCEEDING \$5,000, DURING THE LAST 5 YEARS? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No (Explain)							PRIOR CARRIER & POLICY NO.?			
<b>GENERAL INFORMATION:</b>										
#	EXPLAIN ALL "YES" RESPONSES IN REMARKS				#	EXPLAIN ALL "YES" RESPONSES IN REMARKS				
1	Any aircraft owned, leased, chartered or furnished for regular use?..... <input type="checkbox"/> Yes <input type="checkbox"/> No				8	Do you employ any residence employees? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No				
2	Any driver convicted for any traffic violations? (Last 3 years)..... <input type="checkbox"/> Yes <input type="checkbox"/> No				9	Any non-owned property exceeding \$1,000 in value, in your care, custody or control? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No				
3	Any driver with mental/physical impairments? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No				10	Any non-owned business and/or professional activities included in the primary policies? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No				
4	Any premises, vehicles, watercraft, aircraft used for business?..... <input type="checkbox"/> Yes <input type="checkbox"/> No				11	Does any primary policy have reduced limits of liability or eliminate coverage for specific exposures? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No				
5	Any premises, vehicles, watercraft, aircraft, owned, hired, leased or regularly used, not covered by primary policies? ... <input type="checkbox"/> Yes <input type="checkbox"/> No				12	Was any coverage declined, cancelled, nonrenewed? (Last 5 years) (Not Applicable to Missouri Applicants) ..... <input type="checkbox"/> Yes <input type="checkbox"/> No				

GENERAL INFORMATION: (continued)			
#	EXPLAIN ALL "YES" RESPONSES IN REMARKS	#	EXPLAIN ALL "YES" RESPONSES IN REMARKS
6	Do you engage in any type of farming operation? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No	13	Any motorcycles, mopeds or all terrain vehicles owned by insured (may be excluded)? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No
7	Do you hold any non-remunerative positions? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No	14	Any other underwriting information of which Company should be aware? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No
REMARKS:		15	Are any business activities conducted from your residence or premises (excluded in policy jacket)? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No

**NOTICE TO APPLICANT:** *In compliance with Public Law 91-508, this notice is to inform you that in connection with your application for insurance (1) an investigation may be made as to your insurability, including information as to character, general reputation, personal characteristics and mode of living; and (2) additional information as to the nature and scope of any investigation requested will be furnished to you, upon your written request made within a reasonable time after you receive this notice.*

I have read the foregoing and agree that it is true and complete to the best of my knowledge and that this policy, if issued, and all renewals thereof, are to be issued in reliance upon this information, unless a change in information is supplied by me. I understand that signing this application does not bind me to accept this insurance nor does it bind the company to issue a policy to me.

**PRIVACY POLICY:** I have received and read a copy of the "National Casualty Company Privacy Statement and Procedures". By submitting this application, I am applying for issuance of a policy of insurance and, at its expiration, for appropriate renewal policies issued by National Casualty Company and/or other members of the Scottsdale group of insurance companies. I understand and agree that any information about me that is contained in, or that is obtained in connection with, this application or any policy issued to me may be used by any company within the Scottsdale group to issue, review, and renew the insurance for which I am applying.

**APPLICABLE IN THE STATE OF NEW YORK:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

**FRAUD WARNING:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

INSURANCE CANNOT BE CONSIDERED FOR BINDING UNLESS THIS APPLICATION IS SIGNED BY THE APPLICANT:

Applicant Signature **X** \_\_\_\_\_ Time: \_\_\_\_\_ Date: \_\_\_\_\_

Agent/Broker Signature **X** \_\_\_\_\_ Date: \_\_\_\_\_

# Anderson & Murison's National Casualty Personal Umbrella Rules & Rates

Available in all states except for: Connecticut, Louisiana and New York ( CT and NY quotes available through our secondary market. Please call for details)

Only \$1 million limit offered in the following states: NH, VT, WV

Additional UM coverage available in the following states ONLY: FL, NH, VT, WV

New Jersey risks: apply 1.6% surcharge for the NJGA fee

Florida risks: apply 2% surcharge (1% FIGA and 1% Hurricane Relief Fund)

Underlying Coverage Needed	ALL UNDERLYING CARRIERS MUST BE RATED B+ OR BETTER IN BEST'S GUIDE
Type of Policy	Minimum Limits Required
Comprehensive Personal Liability	300,000 combined single limit
Automobile/Recreational Vehicle	500,000 combined single limit or 500,000/500,000 bodily injury 100,000 property damage or for additional premium charge 250,000/500,000 bodily injury 100,000 property damage (see exceptions below under "Driving Record)
Watercraft	500,000 combined single limit or 500,000/500,000 bodily injury 100,000 property damage \$300,000 is NOT acceptable if there are youthful drivers on policy and a Personal Watercraft
Rental Units	300,000 combined single limit (must include personal injury coverage)

**Other Exposures either excluded or subject to approval**

- Vacant land is subject to underwriting approval
- Farm exposures subject to underwriting approval (please call for farm guidelines)
- Aircraft excluded
- Vehicles covered by underlying policies cannot have been modified, other than from the factory
- Houseboats are excluded
- Youthful driver with an alcohol-related violation

**Ineligible Risks:**

- Risks with commercial underlying policies – OL&T's are acceptable
- Open claims of any type
- Business pursuits including policies written in corporation name
- No underlying CPL

**Automobiles:**

- First two vehicles included in base premium
- No limit on number of vehicles
- Corporate vehicles are unacceptable UNLESS insured is sole proprietor

**Driving Record: Surcharges apply per HOUSEHOLD not per driver**

- Surcharge added for more than 1 accident per household
- Surcharge added for more than 3 violations per household
- Surcharge added for major conviction

To qualify for lower liability limit options, drivers must qualify as "good drivers" (no more than 2 minor convictions). In order for youthful drivers to qualify for lower limits, they must have no more than 1 minor violation on their driving record. All other youthful drivers require 500/500/100 or 500 csl.

**Please refer to company for the following risk:**

- Farms
- Drivers over 70 years of age with driving activity in the past 3 years
- Vacant land
- Target risks (entertainment, sports and political personalities. May include highly visible professional or business personalities)
- Applicants who have had more than one liability claim that exceeds \$5,000 in payment during the last 5 years.

# A & M Personal Umbrella Rating Worksheet- National Casualty rates

In the following states, we only offer 1 million umbrellas: NH, VT, WV

Additional Um coverage of \$1 mil. can be purchased in the following states: FL, NH, VT, WV

(\$100.00 per vehicle except for WV where it is \$50.00 per vehicle)

Do not write in the following states :LA,CT, NY

New Jersey risks: apply NJGA .9% surcharge

Florida risks: 1% surcharge

<b>RATE:</b>	<b>1 ML</b>	<b>2 ML</b>	<b>3 ML</b>	<b>4 ML</b>	<b>5 ML</b>
BASIC INCLUDES: (1 house/2 vehicles)	198	358	470	583	667
<b>ADDITIONAL CHARGES</b>					
EACH ADT'L VEHICLE	25	40	50	60	70
EACH SECONDARY RESIDENCE	20	30	40	50	60
EACH YOUTHFUL DRIVER (UNDER 22)	25	40	50	60	70
EACH DRIVER 76 AND OVER	25	40	50	60	70
LOWER AUTO LIMITS 250/500/100 OR 300/500/100	50	50	50	50	50
DRIVERS UNDER 22 OR 76 & OVER 250/500/100 OR 300/500/100	100	100	100	100	100
MOTORHOMES	55	75	100	125	150
RENTAL UNITS (PER UNIT, 8 MAX)	15	25	30	35	40
VACANT LAND 0-25 ACRES	40	60	70	75	80
26-100 ACRES	45	70	80	85	90
101-200 ACRES	50	80	95	100	105
201- 300 ACRES	55	90	110	115	120
OVER 300 ACRES	83	135	165	173	180
FARMS (COVERS UP TO 300 ACRES)	60	100	140	155	165
WATERCRAFT UP TO 100 HP	50	75	100	110	120
101 TO 150 HP	75	115	150	160	170
151 TO 200 HP	113	173	218	228	238
201 TO 300 HP	150	230	285	295	305
301 TO 400 HP	198	304	371	381	391
401 TO 500 HP	261	401	482	492	502
OVER 500 HP	392	602	723	738	753
(OVER 300 HP, REFER TO CO)					
SAILBOAT 0-25'	50	75	100	110	120
26' AND HIGHER	88	131	175	193	210
POLICY FEE ( no fee in FL,HI,IA,IN, KS,KY,MD,MO,MT,NJ,NM,SC,TX,WV)	30	30	30	30	30
<b><u>DRIVER SURCHARGE</u></b> <b><u>(PER HOUSEHOLD IN PAST 36 MONTHS)</u></b>					
FIRST 3 MOVING CONVICTIONS	NO CHARGE	NO CHARGE	NO CHARGE	NO CHARGE	NO CHARGE
EACH ADT'L MOVING CONVICTION	75	75	75	75	75
FIRST CHARGEABLE ACCIDENT	NO CHARGE	NO CHARGE	NO CHARGE	NO CHARGE	NO CHARGE
EACH ADT'L CHARGEABLE ACCIDENT	75	75	75	75	75
FIRST MAJOR CONVICTION PAST 36 MONTHS	250	300	350	400	450
ONE MAJOR CONVICTION PLUS ANY MOVING CONVICTION (REFER TO COMPANY)	300	350	400	450	500
2 <sup>ND</sup> MAJOR IN 60 MONTHS (REFER TO CO)	500	600	700	800	900
3 <sup>RD</sup> MAJOR IN 60 MONTHS (REFER TO CO)	1000	1500	2000	2500	3000