



122759

Operations Address
Operations Phone #

**POLICY INFORMATION FORM**

This document is issued as a matter of information only and confers no rights upon the document holder. This certificate does not amend, extend, or alter the coverage, terms, exclusions, conditions, or other provisions afforded by the policy. We hereby certify that insurance coverage is now in force with our Company as outlined below.

**TITLE OF INSURED:**

**Policy No:** \_\_\_\_\_ **Effective:** \_\_\_\_\_

**Account No:** \_\_\_\_\_ **Expires:** \_\_\_\_\_

**Description & Location of Property Covered:** \_\_\_\_\_ **Index No:** \_\_\_\_\_

Real and Personal Property \_\_\_\_\_ **Ins. Loc:** \_\_\_\_\_

**COVERAGE IN FORCE:** (Subject to limits of liability, deductibles and all conditions in the policy)

**Insurance Provided:** \_\_\_\_\_ **Peril:** \_\_\_\_\_ **Limit of Liability:** \_\_\_\_\_

PROPERTY DAMAGE \_\_\_\_\_ ALL RISK \_\_\_\_\_

**THIS POLICY INSURES THE FOLLOWING KINDS OF PROPERTY:**

With respects to Personal Property.

Mailing:

PIF Number:

Authorized Signature/Issue Date

For questions, contact: