

Hermitage Insurance Company

Short Form Renewal Application

Hermitage Insurance Co
2780 Bert Adams Road
Suite 302
Atlanta, GA 30339-3917

Re: Renewal of _____

Policy Period: _____

Named Insured (as it should appear on policy): _____
dba _____

Mailing Address: _____

Please review and advise on the following questions:

1) Any new, discontinued or material changes to the insured's operations? Yes____ No____
(If yes, please describe including new class codes, premium basis and any additional property information available):

2) Has insured purchased or occupied any additional premises? Yes____ No____
(If yes, please describe and also detail under property portion of this renewal application):

The following sections are to be completed only if there are changes being requested to the expiring policy and only where applicable:

General Liability:

General Aggregate: _____ Prod/Compl. Ops: _____ Pers. / Adv. Injury: _____

Each Occurrence: _____ Fire Damage: _____ Medical Expense: _____

Premium Bases: _____

Property:

Cause of Loss: _____ Deductible: _____ Co-Ins: _____ Valuation: _____

Location / Protection Info:

Loc.	Amount of Ins.	Construction	Prot. Class	Yr. Built	Stories	Area	Systems Updates: Elec. / Htg / Roof / Plmb:
1	_____	_____	_____	_____	_____	_____	____/____/____/____
2	_____	_____	_____	_____	_____	_____	____/____/____/____

If the answer to questions 1 or 2 is yes this renewal application must be signed by the insured.

Producer's Signature

Producer's Name

Date

Insured's Signature

Title

Date