

MID-CONTINENT INSURANCE COMPANY, P. O. BOX 632, SOMERSET PA 15501-0632 (814) 445-8905
DWELLING APPLICATION – A separate application is required for each dwelling.

APPLICANT'S NAME & MAILING ADDRESS: _____

PHONE # FOR INSPECTION: _____

Requested POLICY PERIOD: INCEPTION DATE _____ EXPIRATION DATE _____

FULL ADDRESS OF LOCATION: _____

AGENCY: _____

COVERAGE REQUESTS:				
DWELLING COVERAGE:	PERSONAL PROPERTY	RENTAL VALUE	OTHER STRUCTURES ON PREMISES	DEDUCTIBLE (MINIMUM \$250.)
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

DWELLING DESCRIPTION:				
CONSTRUCTION TYPE: ()FRAME ()JOISTED MASONRY ()OTHER: Describe _____				
FAMILIES: ()ONE ()TWO ()THREE		FIREWALL SEPARATION ()YES ()NO N/A ()		
YEAR OF CONSTRUCTION: _____		YEAR OF PURCHASE: _____		
MORTGAGE HOLDER (Name and Address): _____				
OCCUPANCIES of adjacent exposures: Right _____ Left _____ Rear _____				
ANY OPERATIONAL FIREPLACES/HEATSTOVES? ()YES ()NO , if yes list number & location _____				
AGE, CONDITION OR REPLACEMENT OF SERVICES				
	HEATING	ELECTRICAL & WIRING	PLUMBING	ROOF
TYPE				
AGE				
INSPECTED	Year: _____	Year: _____	Year: _____	Year: _____
CONDITION				

HISTORY:			
PRIOR CARRIER: _____			
DID THEY: ()CANCEL ()NON-RENEW ()DECLINE If so, why? _____			
EXPLAIN ANY BREAK IN COVERAGE. _____			
CLAIM RECORD (PAST 3 YEARS)	DATE OF LOSS	DESCRIPTION OF LOSS	AMOUNT PD:

LIABILITY INFORMATION: Complete the following section only if you are requesting liability coverage.	
Limits of Liability Requested: \$ _____ per occurrence \$ _____ aggregate	
Occupancies of any other structures on the premises: _____	
SWIMMING POOL: ()YES ()NO	
IS YARD FENCED OR IS THERE A FENCED AREA FOR ANIMALS? ()YES ()NO If yes, please complete the following: Construction of fence? _____ Height? _____ Condition? _____ Gate is secured by? _____	
ANIMALS ON PREMISES: ()YES ()NO, if yes please complete this section	
ANIMAL(S) check all that apply DOG () OTHER () describe: _____	
HOUSED: ()IN HOUSE ()OUTDOORS ()BARN ()OTHER, describe: _____	
SEX: ()FEMALE ()MALE	AGE: _____ BREED: _____
ANY INCIDENT INVOLVING THE DOG (OR PET)? ()YES ()NO If yes, please explain: _____	

ATTACH PHOTO

Applicant's Signature _____

Producer's Signature _____