



ATM Contractors Quick Indication Sheet

| | | | | |
|--|-------------|-------------|-------------------------|-------|
| CLIENT PROFILE | | | | |
| Business Name (Enter owner name only if no DBA) | | | | |
| DBA: | | | Contractors License No: | |
| Mailing Address | | | | |
| | | | | |
| City | State | Zip Code | Business Phone | |
| Form of Business | | | Business Fax | |
| Proprietorship | Partnership | Corporation | LLC | Other |
| | | | Business Email | |
| Check if Premises (Street Address) is different from the mailing address | | | | |

| | | | |
|----------------|-----------|-------------------------------|--|
| Owner 1 | | | |
| First Name | Last Name | Years Construction Experience | |
| | | | |
| Owner 2 | | | |
| First Name | Last Name | Years Construction Experience | |
| | | | |
| Owner 3 | | | |
| First Name | Last Name | Years Construction Experience | |
| | | | |

| | | | |
|--------------------------|--|-----------|--|
| Proposed Effective Date: | | | |
| | | | |
| State: CA | | Zip Code: | |
| | | | |
| Classification: | | | |

| | | | |
|---|--|-----------------------------|------------------------|
| Optional Coverages | | | |
| Blanket Additional Insured | | Identity Recovery | Data Compromise |
| Contractor Tools & Equipment | | Contractors Installation | Computer Equipment |
| Business Personal Property | | Buildings & Business Income | Miscellaneous Coverage |
| Hired & Non Owned Auto | | | |
| <small>Available in: AZ, OR, WA, NV, ID, NM, WY, MT</small> | | | |

| | | | |
|-------------------------|----------|-----------|------------------------------|
| Available Limits | | | Years Consecutively Licensed |
| 300/600 | 500/1000 | 1000/2000 | |
| Deductibles | | | No. of Employees |
| \$500 | \$1,000 | \$2,500 | |

| | | | | |
|---------------------------|----------------------|-------------------------------------|---------------------|-------------|
| Exposures | | | | |
| Class Code | No. of Active Owners | Employee Payroll (Excluding Owners) | Subcontractor Costs | Gross Sales |
| | | | | |
| Description of Operations | | | | |
| | | | | |

Email application to contractors@atminsurance.com