
The ACORD 125 – Commercial Insurance Application must be completed in addition to this Supplement.

1. Named Insured: _____
2. Named Insured Mailing Address: _____

3. Is the premises used for other operations (for example, schools, day care centers, meeting groups)? Y ___ N ___
 - If yes, please describe: _____
 - Are these operations run by the applicant or contractors? _____
 - If run by contractors, is the applicant named as Additional Insured on their liability policy, and are the limits equal to or higher than the applicant's? Yes ___ No ___
4. Are there any off-premises trips, camps or conventions sponsored by the applicant? Yes ___ No ___
If yes, please describe: _____
5. Is the building(s) on the Historic Registry? Yes ___ No ___
6. What is the appraised value of any art work or religious icons to be insured? _____
7. Have there been any vandalism losses in the past three years? Yes ___ No ___
8. Have there been any physical or sexual abuse claims within the past 5 years? Yes ___ No ___
9. Is there a cemetery, burial ground or mausoleum owned by the applicant? Yes ___ No ___
If yes, is the cemetery, burial ground or mausoleum located on the premises? Yes ___ No ___
10. If there is cooking on the premises, please answer the following questions:
 - a. Is there an automatic extinguishing system over all cooking surfaces? Yes ___ No ___
 - b. Is there a cleaning contract in place with an outside firm? Yes ___ No ___
 - c. Are hoods and ducts cleaned regularly by employees? Yes ___ No ___

Named Insured Signature: _____

Date: _____

FRAUD WARNINGS

To All Prospective Insureds: 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, for the purpose of misleading, conceals information concerning any fact material thereto, may commit a fraudulent insurance act which is a crime and subjects such person to criminal and civil penalties in many states.

To Prospective Insureds in:

Colorado: It is unlawful to knowingly provide false, incomplete or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claiming with regard to a settlement or award payable for insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

District of Columbia: "Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison."

Florida and Oklahoma: Any person who knowingly and with intent to injure, defraud or deceive any insurance company, files a statement of claim containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

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 \$5,000 and the stated value of the claim for each such violation.

New York (Fire insurance applications): Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. The proposed insured affirms that the foregoing information is true and agrees that these applications shall constitute a part of any policy issued whether attached or not and that any willful concealment or misrepresentation of a material fact or circumstances shall be grounds to rescind the insurance policy.

New York (Automobile): Any person who knowingly makes or knowingly assists, abets, solicits or conspires with another to make a false report of the theft, destruction, damage or conversion of any motor vehicle to a law enforcement agency, the department of motor vehicles or an insurance company, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed \$5,000 and the value of the subject motor vehicle or stated claim for each violation."

Pennsylvania (Automobile): Any person who knowingly and with intent to injure or defraud any insurer files an application or claim containing any false, incomplete or misleading information, shall, upon conviction, be subject to imprisonment for up to seven (7) years and the payment of a fine of up to \$15,000.



P.O. Box 650 • 57 Parker Rd. • Barre, VT 05641
800-548-4301 • www.neee.com

Supplemental Application – Churches and Houses of Worship
