

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

ELEVATOR CONTRACTORS SUPPLEMENTAL (Complete in addition to ACORD Application)

Proposed First Named Insured & Other Named Insured(s):									
Location Address Street City			Соц	County		State	ZIP Code		
BUSINESS INFORMATION									
1.	Number of years' experience:								
2.	Is business licensed?								
3.	Work Perform	ned		%		N/A			
•	Commercial								
-	Residential (A	Apartments	s, Condos, etc.)						
-	Private Dwelli	ng							
-	Escalator								
-	Buildings In E	xcess Of	8 Stories						
	Handicap Lifts	s/Patient L	ift						
	Other								
IMPORTANT NOTICE									
DECLARATION									
I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE.									
As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.									
SIGNATURES									
Applicant Signature			Title				Date		
Producer Signature								Date	
Agent Name and Address									