



Wexler, Wasserman & Associates Insurance Agency, LLC.
Wexler Insurance Agency, Inc.
Wasserman & Wexler, LLC
 1120 PONCE DE LEON BLVD
 CORAL GABLES, FL 33134
 1-800-432-1853



PERSONAL ARTICLES PROPOSAL FORM

Please answer all questions as fully as possible. You are reminded that knowingly concealing or misrepresenting any material fact or circumstance will void this insurance.

1. Name of Assured (s): _____ DOB: _____
 _____ DOB: _____

2. Occupation: _____

3. Address: _____
 City: _____ State: _____
 County: _____ Zip-Code: _____

Do you have any residences which are located outside of the USA? Yes No

If so, what is/are the address(es)?

Period of time spent at the above address(es) per annum?

(1) _____
 (2) _____
 (3) _____

Please describe the security at any foreign residence

4. Contact Phone #: _____ Contact Fax #: _____

Email Address: _____

5. Has the Assured (s) suffered any loss (es), insured or otherwise, during the past five years? *(If "yes" Explain Below)* Yes No

Date of Loss	Nature of Loss	Amount Paid
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Has insurance coverage ever been refused or cancelled? Yes No

If "Yes", Please explain:

7. Who is your present Insurance Carrier? _____

8. State full specifications of security systems &/or equipment (including safes) at all locations where items are situated: _____

9. highest item for each section.

	Total Value	Highest Value
a) Painting:	_____	_____
b) Non-Fragile Sculptures:	_____	_____
c) Fragiles:	_____	_____
d) Jewelry:	_____	_____
e) Furs:	_____	_____
f) Other:	_____	_____
If "Other", Please list:	_____	_____

IN RESPECT OF ARTWORK

10. What is the date of the last appraisal/valuation? _____
Underwriters will require a re-appraisal/re-evaluation at least every three (3) years

11. Is Coverage required at third party's premises? Yes No
If "Yes", Please give details: _____

12. Is coverage required for Transits? Yes No
If "Yes", Please give details: _____

13. What are the Territorial Limits required? _____

14. What is the anticipated exposure? _____

IN RESPECT OF JEWELRY

15. Is coverage required off premises at a bank vault/SDB? Yes No

If "Yes", what is the required limit? _____

IN RESPECT OF JEWELRY AND FURS

16. Is coverage required off premises while being carried/worn overseas? Yes No

If "Yes", what is the anticipated number of days required? _____

ADDITIONAL INFORMATION REQUIRED

17. Additional information required by underwriters if cover required for:

a) **Earthquake:**

i) Date of Construction of the Premises where interest is situated: _____

ii) Construction and type of premises where interest is situated:

iii) Is any part of the construction raised on stilts or supports of any kind? Yes No

iv) Are the foundations sunk into bedrock? Yes No

v) Are paintings permanently secured to walls? Yes No

vi) Are fragile images secured to their display surfaces? Yes No
(i.e. with museum wax)

b) **Windstorm** in respect of premises situated within the Coastal region of U.S. Gulf States or U.S. Eastern Seaboard:

i) What is the actual distance from the coastline/shoreline? _____

ii) Does the property have professionally fitted storm shutters over the windows? Yes No

iii) What is the height of the property above sea level? _____

18. Any other material facts/circumstances? Yes No

If "Yes", please list them: _____

Sign: _____

Date: _____