

# Benchmark

**MANAGEMENT GROUP, INC.**

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## EXCESS GARAGE APPLICATION

### APPLICANT INFORMATION

Policy Period Requested: From \_\_\_\_\_ To \_\_\_\_\_

Business Trade Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Years in this Business? \_\_\_\_\_ How many years prior experience in the automotive industry? \_\_\_\_\_

What is applicant's Website address?

Business Entity:  Individual  Partnership  Corporation  LLC

### UNDERWRITING INFORMATION

- Attach copy of underlying insurance company's Garage Application (ACORD not acceptable)
- Attach copy of Loss History or Loss Runs for 3 prior years
- Attach copy of Garagekeepers and/or DOL rating worksheet for underlying policy

### COVERAGE REQUESTED

**Excess Garagekeepers Limit \$** \_\_\_\_\_

#### Underlying Insurance

Insurance company	Policy Number	Policy Period	Limit of Insurance	Premium
_____	_____	_____ to _____	\$ _____	\$ _____

Basis: Legal Liability  or Primary

**Excess Dealers Physical Damage Limit \$** \_\_\_\_\_

Loss Payee \_\_\_\_\_

#### Underlying Insurance

Insurance company	Policy Number	Policy Period	Limit of Insurance	Premium
_____	_____	_____ to _____	\$ _____	\$ _____

Wind/Hail/Flood  Included or  Excluded

Remarks: \_\_\_\_\_

\*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, may be committing a fraudulent insurance act, and may be subject to a civil penalty or fine.

\*Not applicable in all States

General Agency Name \_\_\_\_\_ Agency Number \_\_\_\_\_

Underwriter's Name \_\_\_\_\_ Date \_\_\_\_\_