Chubb International Advantage® Application

Property Supplement

CHUBB®

Applicant Information

Named Insured

Broker Information

Brokerage Name

Coverages Requested (check all that apply)

☐ Building	☐ Personal Property	☐ Boiler and Machinery	☐ Business Income/ Extra Expense

Deductible(s) Requested:

☐ $1,000	☐ $2,500	☐ $5,000	☐ $10,000	☐ $25,000

Perils:

☐	All Risk	☐	All Risk (including Flood and Earthquake)

Sublimits

Earthquake	$	Windstorm:	$	Flood:	$

Salesperson's Samples

Description of Salesperson's Samples:

Salesperson's Samples Limit: $

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Transit

Description of Goods:			
Limit Requested:	$	Destination of Shipments:	
Estimated Annual # of Shipments:		Annual Value of Shipments:	$

Property On Exhibition

Description of Goods on Exhibition:			
Exhibition Limit:	$	# of Annual Exhibitions	

Cargo

Description of Goods Shipped			
Countries:			
Limits Requested:	$	Estimated Annual # of Shipments:	
Annual Value of Shipments:		Certificates Required (if yes, a separate marine cargo policy is required. Supplemental application available at www.aceadvantage.com/applications)	☐ Yes ☐ No

Location Information (complete for each location to be insured or amend any spreadsheet submitted separately to include all information)

Complete Location Address

Street Address:
City, State:
Country, Postal Code:

Insurable Values

Building:	$	Machinery and Equipment:	$
Merchandise:	$	Stock:	$
Other Property:	$	Boiler & Machinery Sublimit:	$
Business Income Including Extra Expense: (annual values only)		$	
Country Tax ID:			
Description of other Property:			

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Construction

Year Built:	Type of Construction	Type of Roof :

Occupancy

Office Occupancy: ☐ Yes ☐ No	# Stories:	Basement: ☐ Yes ☐ No
Building Square footage:	☐ Owned	☐ Leased
Warehouse Occupancy: ☐ Yes ☐ No		
If yes, ☐ Sole-occupant ☐ Multi-tenants	If Multi-tenants, List Other Occupants	
Manufacturing Occupancy: ☐ Yes ☐ No	If yes, Describe Manufacturing Process:	

Protection

Is the building Sprinklered? ☐ Yes ☐ No	Distance to the closest Fire Hydrant:	Distance to the Closest Fire Station:
Other Protection Devices: (Fire alarm, burglar alarms, guards)		

External Exposure

Nearest Occupants that surround building:	Building Distance from nearest body of water:	

The undersigned authorized officer of the applicatant declares to the best of his/her knowledge the statements set forth herein are true. Signing of the application does not bind the undersigned or Chubb, but it is agreed that the information supplied in this form shall be the basis of the contract should a policy be issued.

Signature of Applicant's Authorized Representative: _____

Signature of Producer: _____

Date: _____

Date: _____

Chubb. Insured.℠

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