

**MINICOMPUTER COVERAGE APPLICATION**  
 (Attach to ACORD 125 – Commercial Insurance Application)

**APPLICANT INFORMATION**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_

Policy Dates: \_\_\_\_\_ Business Description:  Individual  Partnership  Corporation  Other \_\_\_\_\_  
 Years in business \_\_\_\_\_

**EQUIPMENT SCHEDULE**

Location #	Building Construction	Description of Equipment	Serial #	Replacement Cost	Portable? (Y or N)

If insuring identical items of \$5,000 or less each, attach invoice or lease, rather than list each individually.

**COVERAGE EXTENSIONS**

Data, Media, Programs (\$10,000 included)			Business Income/Extra Expense (\$5,000 each included)	
Location	Limit		Location	Limit

**Additional Coverage – Transit – Limit \$ \_\_\_\_\_**

**List any loss payees, lessors, other insureds:**

Serial #	Name, Address	Relationship

**THREE YEAR LOSS EXPERIENCE**

Losses (description and amounts paid and incurred)

Date

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Comments \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Applicant Signature

Producer Name & Address