

Re-Issue Application

Applicant Name and Address

Agency Information

<p>_____</p> <p>_____</p> <p>_____</p>	<p>Agency: _____</p> <p>Agency Number: _____</p> <p>Agent Name: _____</p>
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ALL RE-ISSUE APPLICATIONS MUST HAVE UNDERWRITING APPROVAL PRIOR TO BINDING
Use only when the policy has cancelled and the lapse period is less than 30 days.

Cancelled policy number _____

Cancellation Date _____

BINDING APPROVAL RECEIVED FROM _____ **ON** _____
UNDERWRITER DATE

Re-issue effective date _____ Do not back date – MUST use current date – If re-issue date is 30 days or more from the cancellation date, a standard application must be submitted.

Amount billed: \$ _____ + \$25 Re-Issue for Non-Payment (includes late fee) = Total Due: \$ _____
 \$30 Re-Issue for NSF (includes late fee)

The following are the only forms of acceptable payment (check one): Agency Sweep Agency Check
 Cashier's Check / Money Order

Statements of the Applicant:

All Questions Must be Answered

If 'Yes' to any questions, binding authority is revoked and coverage cannot be bound. No insurance is effective until accepted by the company.

- Yes No Has the applicant had a loss or is aware of any potential liability or property loss since the policy was cancelled?
- Yes No Does the property have any un-repaired wind, hail, fire, water, or other damages?
- Yes No Does the applicant currently have or seeking any of the following: bankruptcy protection, property foreclosure (initiated/completed) or delinquent taxes?
- Yes No Is the property currently or likely to be vacant, unoccupied, or for sale in the near future?
- Yes No Does the applicant, or anyone in the household, have in their care, custody or control a Rottweiler, Doberman, Pit Bull, Chow-Chow, German Shepherd, Staffordshire Terrier, Husky, Alaskan Malamute, Great Dane, St. Bernard, Akita, or any vicious dog or other animal?
- Yes No Does the applicant, or anyone in the household, have in their care, custody or control a dog or animal that has previously caused injury or property damage?
- Yes No Has the applicant sustained any water and/or mold losses, or have they been informed they have a mold problem?
- Yes No Are any of the following applicable, regarding solid fuel units on the premise: Primary or only source of heat; Located in a detached structure within 25ft. of an insured building; Designed as an outdoor unit housed inside/alongside a structure; Vented to a single-walled metal or iron chimney, or an unlined chimney; Located in an attached garage?

IMPORTANT: READ CAREFULLY BEFORE SIGNING

I have read the above and hereby declare to the best of my knowledge and belief that all of the questions listed above have been answered correctly. **I understand that Mutual of Wausau Insurance Corporation may perform a property survey at any time.** The property survey or any resulting advice or report does not warrant that the property or operations are safe or are in compliance with any law, rule or regulation.

I authorize Mutual of Wausau Insurance Corporation to obtain a consumer credit report and/or information for underwriting purposes. You have the right to make a written request within a reasonable period of time to receive details about the nature and scope of the gathered information.

APPLICANT SIGNATURE _____ DATE _____

AGENT SIGNATURE _____ DATE _____