

HUDSON INSURANCE COMPANY 100 WILLIAM STREET, 5TH FLOOR NEW YORK, NY 10038 PERSONAL UMBRELLA APPLICATION

Last			First	Middle								
							Producer					
NAN							Producer Code					
ADI	ORES	S Number & Street City State, Zip				Agt/Brkr Lic.#						
GAI	RAGI	NG ADDRESS					Address _					
(if d	iffere	nt)					City					
							E-Mail					
POI	LICY	Y From:		To:	Rene	ws Policy Number						
PEF	RIOE	/ /20		/ /20				Tel: Fax:				
		UMBRELLA COVEI	RAGES	PREMIUMS			Retail Agent					
App	olicat	tion for Primary Umbrella	, 🗆	BASIC \$			Retail					
App	olicat	tion for Excess Umbrella		RESIDENCES	RESIDENCES \$			Retail Agent Code				
POI	LICY	AMOUNT	RETENTION	AUTOMOBILES			Agt/Brkr Lic. #					
				RECREATIONAL VEHICLES	S							
\$		MILLION	NONE	WATERCRAFT			Address					
INC	REA	.SED UM: \$1,000,000 o	or \$2,000,000	OTHER			City					
							E-Mail					
ID T	THE	TT COVERAGE: Y	or N	TOTA	AL \$		E-Maii					
PR	ГМΔ	RY UMBRELLA INFO	ORMATION:									
110		KI UNDKELLII INI U										
Unc	lerly	ing Umbrella Carrier:			U	nderlying Umbrella I	Limit: \$					
PR	ΙMΑ	RY POLICY INFORM	ATION:									
OPERATOR INFORMATION: LIST ALL MEMBERS OF HOUSEHOLD AND ALL OPERATORS OF VEHICLES/WATERCRAFT												
#		NAME		DRIVERS LICENSE	STATE	DATE OF	Majors	MINOR	Accidents (note fault)	Non-Chargeable violations		
				NUMBER		BIRTH	(3 Yrs)	(3 Yrs)	(3 Yrs)	(3 Yrs)		
1												
2												
3												
4												
5												
EM	PLC	OYMENT				1		l .				
oco	CUPA	ATION:		EMPLOYERS NAME & ADI	DRESS:							
SPOUSE'S/OTHER'S OCCUPATION: EMPLOYERS NAME & ADDRESS (If not employed, so indicate):												
REAL ESTATE: LIST ALL OWNED, LEASED, OR OCCUPIED RESIDENCES, BUILDINGS, FARMS, VACANT LAND, ETC.												
#	LOCATION					# UNITES/ACRES	Underlyin	g Carrier	Underlying Limit	OCCUPANCY Type		
1									Limit	- 1120		
2												
3												
4												
5												

HUD-PUMB APP (02/15) Page 1 of 4

AUTOMOBILES AND RECREATIONAL VEHICLES: LIST ALL OWNED OR LEASED AUTOMOBILES, MOTORHOMES, MOTORCYCLES, SNOWMOBILES, DUNE BUGGIES, MINIBIKES, GOLFCARTS, ETC.												
#	YEAR	MAKE & MODEL		VEHICLE TYPE			RLYING RRIER			NDERLYING /UIM LIMITS		
1					1112	Cri	KIKILK	EMBELT LEWITS	OIVI/C) II VI 12 II V	IIIS	
•												
2												
3												
4												
5												
WATERCRAFT: LIST ALL WATERCRAFT OWNED, LEASED, CHARTERED OR FURNISHED FOR REGULAR USE.												
#	YEAR	TYPE, MANUFACTURER, MODEL		LNGTH:		H.P.	MAX SPEED			NDERLYING BILITY LIMITS		
1					FT.							
2					FT.							
3					FT.							
4					FT.							
5					FT.							
PRIOR EXPERIENCE: PRIOR CARRIER & POLICY #												
	ANY PENDING LITIGATION, OPEN OR CLOSED CLAIM ON ANY PRIMARY OR EXCESS POLICY, EXCEEDING \$25,000, DURING THE LAST 5 YEARS?											
	□ NO □ YES (EXPLAIN)											
	GENERAL INFORMATION: EXPLAIN ALL "YES" RESPONSES IN REMARKS											
	Any airce	aft owned, leased, chartered or furnished for regular use?	YES	NO		Does any nrin	nary policy b	ave reduced limits of lightly	ity or	YES	NO	
1		l in policy jacket)			10	eliminate cov	Does any primary policy have reduced limits of liability or liminate coverage for specific exposures? Vas any coverage declined, cancelled non-renewed?					
2	Any drive	er convicted for any traffic violations? (Last 3 years)			11	(Last 5 years)						
3	3 Any driver with mental/physical impairments?			Ш	12	Any non-owned business and/professional activities included in the primary policies?						
4	71,,,,,				13	Are any business activities (including daycare) conducted from your residence or premises (excluded in policy jacket)						
Any premises, vehicles (including motorcycles, mopeds, ATV's), watercraft, owned, hired, leased or regularly used, not covered by primary policies?					14	Any animals in the household? Please list b including breed, bite history, fighting or security training, if applicable.						
6	1				15	Any land used for hunting?						
7	Felony (referral)?				16	Any swimming pools? Please specify fenced or unfenced, diving boards or slides						
8	Any applicant considered a high profile risk such as politicians, entertainers and professional athletes? (Referral)				17	Any excluded drivers on the primary policy?						
Are any applicants currently insured with Hudson Insurance Group? If so, please provide the policy number(s).					18	Any other underwriting information of which Company should be aware?						
REMARKS:					19	Do you hold a	any non-remu	inerative positions?				

HUD-PUMB APP (02/15) Page 2 of 4

I would like to purchase, at an additional charge, (\$25,000 is included), increased Uninsured/Underinsured Motorists coverage as part of my Per Umbrella policy. I understand that for the policy to provide Uninsured/Underinsured motorists coverage that I must have underlying Uninsured/motorist's coverage equal to the primary Automobile limits as indicated on the application.	
	/Underinsured
motorist's coverage equal to the primary Automobile limits as indicated on the application.	
I hereby REJECT the opportunity to purchase increased Uninsured/Underinsured Motorists coverage as part of my Personal Umbrella policy.	
IF YOU REJECT THE UNINSURED/UNDERINSURED MOTORIST COVERAGE YOU ARE ELECTING NOT TO PURCHASE (CERTAIN
VALUABLE COVERAGE WHICH PROTECTS YOU AND YOU'RE FAMILY OR YOU ARE PURCHASING	
UNINSURED/UNDERINSURED MOTORISTS LIMITS LESS THAN YOUR LIMITS OF LIABILITY WHEN YOU SIGN THIS FO	ORM.
Applicant's Signature	
1-ppression of Digitation	
DEDDEGENE AWAYS TO MISSINED AND A SENSE	
REPRESENTATIONS TO INSURED AND AGENT	

Fraud Warnings

Various state regulations require us to inform you of fraud warnings.

To insureds in

Alaska, Arkansas, Alabama, Arizona, California, Connecticut, Delaware, Georgia, Idaho, Illinois, Indiana, Iowa, Kansas, Massachusetts, Maryland, Michigan, Missouri, Mississippi, Montana, Nebraska, New Hampshire, Nevada, North Carolina, North Dakota, Oregon, South Carolina, South Dakota, Texas, Utah, Vermont, Washington, Wisconsin, West Virginia, Wyoming:

NOTICE: To All Prospective Insureds: 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, for the purpose of misleading, conceals information concerning any fact material thereto, may commit a fraudulent insurance act which is a crime and subjects such person to criminal and civil penalties in many states.

I have read the foregoing and agree that it is true and complete to the best of my knowledge and that this policy, if issued and all renewals thereof are to be issued in reliance upon this information, unless a change in information is supplied to me. I understand that signing this application does not bind me to accept this insurance nor does it bind the company to issue a policy to me.							
INSURANCE CANNOT BE CONSIDERED FOR BINDING UNLESS THIS APPLICATION IS SIGNED BY THE APPLICANT:							
Applicant's Signature X	Time:	Date:					
Agent/Broker Signature X		Date:					

HUD-PUMB APP (02/15) Page 3 of 4

Scheduled Items (Cont.)										
#	Locati	ons:		Units/Acres		nderlying Carrier	Underly limit		Occupancy Type	
6									71	
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
AUT MOT	OMOBII FORCYCL	ES AND RECREATIONAL VEH ES, SNOWMOBILES, DUNE BUG	ICLES: LIST AI GIES, MINIBIKI	LL OWNED OR LI ES, GOLFCARTS,	EASEL ETC.	O AUTOMOBIL	ES, MOTO	ORHO	MES,	
#	YEAR	MAKE & MODEL	VEHICLE TYPE	UNDERLYIN CARRIER	G UNDERLYING LIABILITY LIM				NDERLYING I/UIM LIMITS	
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										

HUD-PUMB APP (02/15) Page 4 of 4