

THOMSON & PRATT INSURANCE ASSOCIATES, INC.
FINE ART DIVISION
44815 Fig St. #129
Lancaster, CA 93534
661-942-5200 phone • 877-334-6327 toll-free
661-942-4498 fax

MUSEUM/UNIVERSITY COLLECTION INSURANCE COVERAGE

Insured's Name: _____

Address: _____

City/State/Zip Code: _____

Phone: _____ Fax: _____

Email Address: _____

Director's Name: _____ Registrar's Name: _____

Year Founded: _____ Is Museum Accredited? _____

Type & Nature of Collection: _____

Number of Objects in the Collection: _____

Total Collection Value: \$ _____ Probable Maximum Loss: _____

Limits:	Current	Requested
At Named Premises	_____	_____
Any other Location	_____	_____
Transit (domestic/worldwide)	_____	_____
Deductible	_____	_____

Losses over last five years (amount, year & description of loss): _____

Other Named Locations: (Describe use, etc.)

1. _____

2. _____

3. _____

Exhibition during the next year requiring insurance in excess of the requested limits:

1. _____

2. _____

3. _____

Please attach Standard Facilities Report with this application.

Insured's Signature & Date: _____