



COMMERCIAL GENERAL LIABILITY

Return via email to steven@marcusagent.com or FAX (866)669-0081

COMMERCIAL GENERAL INFORMATION

Entity Name: Website: Email: Phone:

Entity Address: DBA:

Tax ID# Date Established:

Insured Form of Business: Individual LLC Corporation Partnership Other: Number of Partners:

Owner: % Owned: Phone Number: DOB: SS#:

Owner: % Owned: Phone Number: DOB: SS#:

Detail Description of Business Operation:

Gross Annual Sales Volume: \$ % Remodel/Renovation % New Construction % Residential % Commercial

Prior Liability Coverage? Yes No Carrier: Limit:

Loss History Yes No Date of Loss: Loss Description:

Licenses Held: License Numbers: