



The Historic Firearms, *Collectibles* and Sporting Arms Insurance Program

Questionnaire

Name: \_\_\_\_\_  
Street \_\_\_\_\_ Mailing: \_\_\_\_\_  
Town: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Phone: \_\_\_\_\_ VM: \_\_\_\_\_ Cell: \_\_\_\_\_  
E- Mail: \_\_\_\_\_ Occupation: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home, Condo, Apartment: \_\_\_\_\_ Principal/Secondary Residence: \* \_\_\_\_\_

*\*If stored at more than one location, address:* \_\_\_\_\_

Home Construction (Frame, Masonry Siding etc.): \_\_\_\_\_

No. Stories: \_\_\_\_\_ Year Built: \_\_\_\_\_ Foundation Type: \_\_\_\_\_

Roof Type (Hip, Flat, Gable, Gambrel etc.): \_\_\_\_\_

Roof Covering (Asphalt, Shingles, Shake, Metal etc.): \_\_\_\_\_

Nearest Hydrant (Feet): \_\_\_\_\_ Nearest Fire Station: \_\_\_\_\_ Miles: \_\_\_\_\_

Describe Central Alarm: \_\_\_\_\_

Fire/Burglar Alarm: \_\_\_\_\_ (\*Required for collections valued at \$500,000 or more.  
Please provide copy of Fire/ Burglar Alarm Certificate)

Collection kept in Safe or Vault? \_\_\_\_\_ Y/N If yes, describe: \_\_\_\_\_

If kept anywhere but at home, explain: \_\_\_\_\_

Are you a member of the Military or any Collecting/Sportsmen Association? \_\_\_\_\_

If yes, Military Dept.: \_\_\_\_\_ Assoc. Membership Name & ID#: \_\_\_\_\_

Does Collection travel? \_\_\_\_\_ Y/N If yes, where: \_\_\_\_\_

How often? \_\_\_\_\_ per year

CLAIMS describe any previous claims: \_\_\_\_\_

SCHEDULED LIMIT \$ \_\_\_\_\_

Please attach schedule of items for items valued at \$10,000 or more.

(Serial numbers not required) Appraisal required for items valued at **\$50,000** and greater

UNSCHEDULED LIMIT \$ \_\_\_\_\_

Blanket Limit applies when any single item value does not exceed **\$10,000**.

Estimated Number of Items in above Limit: \_\_\_\_\_

Insurance will not be bound until written application is accepted by the carrier and premium received via check or credit card.

Initials: \_\_\_\_\_ Date: \_\_\_\_\_



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**PROPERTY TO BE INSURED**

*(Not required when insuring by the UBC - Unscheduled Blanket Coverage Option)*

1. List all firearms and/or collectibles that you wish to be insured in the program. Serial Numbers are not required; however, you may include them to substantiate the appraised value. If UBC Option is desired, only items in excess of **\$10,000** need to be scheduled.
2. Notice – For individual items valued at more than **\$50,000**, please include a recent appraisal or bill of sale.

Item (Make & Model)	General Description (including gauge or caliber)	Declared Value (round each firearm value to the nearest dollar)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		