

**INLAND MARINE APPLICATION
NSSA/NSCA/ATA/QU**

Effective Date: _____

Expiration Date _____

Producer: **Sportsman's Insurance Agency, Inc.**
Attn: Heidi Juttner or Hollis E. Boss
1364 N. US 1, Suite 503
Ormond Beach, FL 32174

Insured: _____

Circle One:
 NSSA/NSCA member club
 ATA member club
 QU Preserve

Attn: _____

Territory of Operation	Address where items are kept
If mobile, radius in miles: If stationary list property acreage:	If mobile how many months in storage?
Additional Insured, Lender	Additional Insured, Lender
General Information	
Do you rent equipment to or from others? <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes explain:	Is applicant operating any equipment not listed here? <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes explain:
List the intended use of insured items:	Do you carry automobile coverage for the trailers that transport your mobile equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No. If no, our coverage does not apply.

Enter the information on items to be covered on the following table. The Value should be the Manufacturer's Retail List Price or if the items is not being manufactured anymore we will call you to come to an agreement on the value. If you have more than 15 items you can attach a separate schedule.

Item #	Model/ Year	Manufacturer and Model	Date Purchased New/Used	New or Used	Serial Number	Value
Example	1999	Sport Trap, 185PC 6c	5/99	New	334211	\$24500.
					Total values	\$

Total Values \$ _____ X .0125 = \$ _____

Signature : _____ Title: _____ Date: _____