



# MARKEL SOUTHWEST UNDERWRITERS, INC.

## FIRE EXTINGUISHER CONTRACTORS SUPPLEMENT

(Include Acord application)

Applicant's Name \_\_\_\_\_ Location Address: \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 \_\_\_\_\_

Is risk properly licensed where required by law? Yes No License Number \_\_\_\_\_  
 If no, please explain: \_\_\_\_\_  
 Estimated annual payroll: \_\_\_\_\_ Estimated annual receipts: \_\_\_\_\_

Any subcontracting? Yes No  
 If yes, are certificates obtained? Yes No Cost: \_\_\_\_\_  
 Does applicant have Workers Compensation coverage in force? Yes No  
 Does applicant lease any employees? Yes No  
 Any sales other than fire extinguishers? Yes No If yes, receipts: \_\_\_\_\_  
 Is there a retail operation? Yes No If yes, receipts: \_\_\_\_\_  
 Any products imported? Yes No  
 If yes, please explain: \_\_\_\_\_  
 Any manufacturing? Yes No  
 If yes, please explain: \_\_\_\_\_  
 Ansul System Cleaning? Yes No  
 Any installation in aircraft, boats, mobile equipment or vehicles? Yes No  
 If yes, please explain: \_\_\_\_\_  
 Any hydrostatic testing for scuba tanks? Yes No  
 If yes, please explain: \_\_\_\_\_  
 Fire suppression or sprinkler inspection, installation, repair or maintenance? Yes No  
 If yes, please explain: \_\_\_\_\_  
 Any contracts with a city, county or state government? Yes No  
 If yes, please explain: \_\_\_\_\_

Remarks:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

Applicant's Signature \_\_\_\_\_ Producer's Signature \_\_\_\_\_ Date \_\_\_\_\_