



# Nonprofit Insurance Trust

## Application for Builders Risk

[www.nitmn.org](http://www.nitmn.org)

**Producer:**  
 NPIA, Inc. dba: Nonprofits' Insurance Agency  
 21034 Heron Way, Ste 107 Lakeville, MN 55044  
 Ph: (952) 469-5963 Fax: (952) 469-4553

<b>Applicant Information - Complete each field regarding proposed applicant.</b>				
<i>Name of Organization</i>		<i>Organization Contact</i>		<i>Email</i>
<i>Address</i>		<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Phone Number</i>		<i>Fax Number</i>		501(c)(3): <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Expiration Date of Current Property &amp; Liability Coverage</i>			<i>Locations other than MN? (List states)</i>	
<i>Please provide a description of your operations:</i>				

<b>Total Builders Risk Limit: \$</b>	<b>Proposed Deductible: \$</b>
<b>Address:</b>	

**Construction Type:**    **Renovation**       **Ground Up**

<b>Estimated Start Date:</b>	<b>Estimated Completion Date:</b>
------------------------------	-----------------------------------

**(Choose Applicable Types and Limit: \$**

<b>Soft Cost Limit (Optional, Additional Expense):</b>	<b>Proposed Limit</b>	<b>Proposed Deductible</b>
<input type="checkbox"/> <b>Construction Loan Interest</b>	\$	\$
<input type="checkbox"/> <b>Real Estate and Property Taxes</b>	\$	\$
<input type="checkbox"/> <b>Architect, Engineering and Consultant Fees</b>	\$	\$
<input type="checkbox"/> <b>Legal and Accounting Fees</b>	\$	\$
<input type="checkbox"/> <b>Builder's Risk Insurance Premium Change</b>	\$	\$
<input type="checkbox"/> <b>Advertising and Promotional Expenses</b>	\$	\$

*The Undersigned states that s/he is an authorized representative of the Applicant and declares to the best of his/her knowledge and belief and after reasonable inquiry, that the statements set forth in this Application and any attachments submitted with this Application, are true and complete and may be relied upon by Nonprofit Insurance Trust in quoting and issuing the policy. If any of the information in this application changes prior to the effective date of the policy, the Applicant will notify the company of such changes and the Company may modify or withdraw the quote or binder. The signing of this Application does not bind the Nonprofit Insurance Trust to offer, or the Applicant to purchase the policy.*

Print Name	Title
Signature	Date