



HUNTINGTON T. BLOCK INSURANCE AGENCY, INC.

FINE ART INSURANCE Application For Exhibitions

Please answer all questions. If the questions do not apply, write N/A

Name of Exhibition: _____

Coverage Dates Required: From: _____ To: _____

Name of Organizing Group: _____

Mailing Address: _____

Contact Name(s): _____

Telephone Number: _____ Fax: _____

Location of Exhibition: _____

Telephone Number: _____

Will the Exhibition travel? Yes No

If yes, please attach the proposed itinerary and a facility report for each site.

Name of Packer: _____ Name of Shipper: _____

Shipments via: Air Surface

Please note: All works must be professionally packed and shipped.

FACILITIES INFORMATION

Identify the location within the building where the exhibition will be housed:

(e.g., gallery space, lobby, rented room, etc.) _____

Will food or drink be served in the immediate area? Yes No

Type of Building Construction: Brick Frame Fire Resistant Other

Date Built: _____ Date Remodeled: _____

Was the building designed for a museum? Yes No

If not, please indicate original purpose: _____

Please note: A safety and security inspection may be required by the Insurance Company.

Is the building: Fire Proof (non combustible construction materials) Fire Resistant Treated with Fire Retardants

Is the building protected by a central station fire/smoke alarm system? Yes No

Name and address of the alarm company: _____

How far is the building from the local fire department? _____

Does the building have an approved sprinkler system? Yes No

Are there any other approved fire suppression systems in place? Yes No

If yes, please describe: _____

Is the building equipped with a central station alarm system? Yes No

Name and address of the alarm company: _____

Please describe the system(s) in place: _____

How many guards are assigned to the exhibition area? _____

Please note: Underwriters require at least one (1) guard in attendance at all times when open to the public.

EXHIBITION INFORMATION

Exhibition consists of:

Oil on canvas: _____ Watercolors: _____
Photographs: _____ Ceramics/Pottery: _____
Drawings & works on paper: _____ Prints: _____
Other: _____
Sculpture: _____ Fragile _____ Non fragile: _____
Indoor: _____ Outdoor: _____

Are works of art for sale? [] Yes [] No

If yes please note: Insurance value will be selling price less commission.

What is the exhibition's total value? _____

What is the exhibition's highest valued item? _____

Please note: Loan agreements should be obtained for each individual item. A typed list should be forwarded as soon as it is available with Title, Artist, Medium, and Value of each piece to be insured.

Person completing the application: _____

Title: _____ Date completed and submitted: _____

I understand that the insurance company, in determining whether to provide insurance coverage, will rely on the information contained in this form and all other information being submitted. I hereby warrant, represent and confirm that, to the best of my knowledge, all information provided is complete, true and correct.

Signed: _____ Title: _____ Date: _____

PLEASE SIGN AND RETURN TO:



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