



HUNTINGTON T. BLOCK INSURANCE AGENCY, INC.
Application for Musical Instrument Insurance
SYMPHONY ORCHESTRAS and BANDS

Name of Symphony Orchestra or Band: _____

Contact Name: _____ Contact Title: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

1. Desired Coverage Effective Date: _____ 12:01 a.m. standard time at place of issuance

2. Desired Deductible Amount (\$500 is the standard amount): \$1,000 \$2,500 \$5,000 Other: _____

3. Give circumstances of any Musical Instrument insurance losses sustained during the past three years
(including amount): _____

4. If the Symphony Orchestra or Band presently carries Musical Instrument Insurance, please confirm the name of
the insurance company: _____

5. PLEASE ACCOMPANY THIS APPLICATION WITH THE FOLLOWING:

- a. A list of current members
- b. A list of instruments to be insured, with indicated values. Be sure to include bows, instrument case(s) and serial number(s) where applicable.
- c. Appraisals for any scheduled instrument with a value of \$25,000 or higher (Must have been obtained within the last 12 months).

I understand that an ALL RISK OF PHYSICAL LOSS OR DAMAGE insurance premium quotation for the above listed property will be promptly pursued by Huntington T. Block Insurance with an appropriately rated insurer.

It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Signature: _____ Date: _____

CONTACT INFORMATION:



HUNTINGTON T. BLOCK INSURANCE AGENCY, INC.
PO Box 549294, Waltham, MA 02454-9294 | Email: music@HuntingtonTBlock.com | Toll Free: 855-219-3189