Musical Instrument Insurance Program Huntington T. Block Insurance Agency, Inc. Formerly brought to you by Merz-Huber

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APPLICATION FOR MUSICAL INSTRUMENT INSURANCE

Name:				
St	reet Address:			
City: State:		State:	Zip:	
Email:		Phon	Phone:	
1.	Desired Coverage Effective Date:	12:01 a.m. standard time at place of issuance		
2.	Do you presently carry musical instrur	Do you presently carry musical instrument insurance? If yes, please provide the name of the insurer:		
3.	Give circumstances of any Musical Instrument losses sustained during the past three years (including am			
	APPRAISAL(S) MUST ACCOMPANY THIS APPLICATION and must have been made within the past 12 months by a qualified party. BRIEFLY DESCRIBE YOUR INSTRUMENT(S) BELOW AND INDICATE VALUES. (A full description will be obtained from			
	the appraisal) BE SURE TO INCLUDE BOWS, INSTRUMENT CASES AND SERIAL NUMBERS WHERE APPLICABLE. USE AN EXTRA SHEET OF PAPER IF NECESSARY.			
	VALUE	INSTRUMENT		
	\$			
	\$			
	\$			
	\$			
		AL LOSS OR DAMAGE insurance premium quotation f T. Block Insurance with an appropriately rated insure		
Applicant signature: Date:		Date:		
IN	SURER OR ANY OTHER PERSON. PENALTIES I	ING INFORMATION TO AN INSURER FOR THE PURPOSE OF I NCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN ATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED B	N INSURER MAY	