

# National Risk Solutions

Thank you for choosing National Risk Solutions. We look forward to providing you with a quick, competitive quote.

Please complete the following application in its entirety and include any pertinent underwriting information. Also, please be sure to include a fax # or e-mail below where we may return your quote promptly.

Once complete please:

1. E-Mail application to [NRSapps@NRSinsurance.com](mailto:NRSapps@NRSinsurance.com)  
OR
2. Fax application to (877)-743-4252

If you have any questions, please do not hesitate to contact us at (866)-417-4855.

We appreciate your business.

Sincerely,

*The National Risk Solutions Team*

Agency Name  
City, State, Zip  
Contact  
Email Address  
Phone Number  
Fax Number  
Additional Information

National Risk Solutions • PO Box 21407 • St. Petersburg, FL 33742



## Supplemental Questionnaire

To be completed for all Personal Lines submissions or renewals when the Named Insured or Additional Insured is a Trust, Limited Liability Company or Limited Liability Corporation ("LLC"), Limited Liability Partnership ("LLP") or Estate

Named Insured: \_\_\_\_\_

Additional Insured: \_\_\_\_\_

Policy Number: \_\_\_\_\_

**Answer the following questions. Please write legibly**

1. What is the full name of the trust, LLC, LLP or estate? (hereafter, "entity"): \_\_\_\_\_

2. Please list all trustees, LLC managing member(s) and/or board; LLP managing member(s); manager(s); estate administrator(s) and executor(s): \_\_\_\_\_

3. For what purpose was the entity formed? \_\_\_\_\_

4. Does the entity currently engage directly or indirectly in any form of business or own any real estate used for business purposes whether or not identified on the application?  Yes  No

If yes, please explain? \_\_\_\_\_

5. Within the past five (5) years has the entity engaged directly or indirectly in any form of business or owned any real estate used for business purposes?  Yes  No

If yes, please explain? \_\_\_\_\_

6. Within the past five (5) years, has the entity been the subject of litigation of any kind?  Yes  No

If yes, please explain? \_\_\_\_\_

7. Does the entity have any employees? If so, please provide the number of employees and their job responsibilities. \_\_\_\_\_

8. Does the entity own any real estate, personal property or assets not listed on the application?  Yes  No

9. For all exposure(s) listed on the application, please explain:

a)The entity's use and occupancy of any real estate: \_\_\_\_\_

b)The entity's use of personal property and assets: \_\_\_\_\_

10. Does the entity own, maintain or use any automobile, recreational vehicle or watercraft?  Yes  No

If yes, please explain? \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_