## **Renewal Supplemental Application**

P.O. Box 16647, Tampa, FL 33687-6647 Customer Service: 844-722-9985

Important Notice: Renewal Offer is released contingent upon no changes in operations. If changes, please indicate below and submit to Underwriting as soon as possible.

The term Applicant means all corporation

,	Applicant Information:	
	Name of Applicant: Bechtelheimer Enterprises Inc.	
	Policy Number: SPPK0001873-01	
II.	Operations	
1.	Are there any changes to insured's operations? If yes Provide Details below: Yes - Changes V No Change	s
2.	If Lessors Risks, are there any changes in tenants? If so, please update below.	
	Confirm Named Insured maintains COI from all tenants showing equal limits and AI endorsement in their favor.  Yes	T No
	If you answer "Yes" to changes in operations, then please provide details below and contact SafePoint. If no changes size and return	No
	SafePoint. Please answer <u>question #2</u> if the Named Insured operates as a Lesson's Risk.	
III.	Underwriting Questions	
1. 2.	Are any buildings currently vacant or undergoing renovation work?	
	Have any buildings been sold in the past 3-6 months?	
3.	If commercial cooking, confirm Ansul system and hood were serviced in the last six (6) months.	No
4.	Confirm no foreclosure or bankruptcies in the last twelve (12) months.	
5.	In the next 12 months (or during the past 24 months) is the <b>Applicant</b> contemplating (or has the Applicant	
	completed or been in the process of) any reorganization or arrangement with creditors under federal or state law?	s 📝 No
6.	Renewal Offer issued based on no changes. If changes contact underwriting with details immediately.  Projected upcoming year estimated Sales: \$	
1.	Does insured subcontract work? Yes No If yes, are COI obtained from subs naming insured as AI?	es 🔲 N
8.	Any hired Armed Guard Services? Yes No (Renewal offer issued contingent upon no hired armed guards).	
9.	Any changes in ownership? Yes Very No (Renewal offered issued contingent upon no changes in ownership).	
10.	Any changes in mortgagees or loss payees? Yes Vo. If yes, contact Underwriting prior to renewal issuance.	
	No. If yes, contact orderwriting prior to renewal issuance.	
he un	ndersigned is an authorized representative of the applicant and represents that an inquiry has been made to obtain the	1e
10110	rs to questions on this supplemental renewal application. He/she represents that the answers are true, correct and c	omplete.
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Anv	person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any mation or conceals, for the purpose of misleading, information conceals, for the purpose of misleading, information concerning any first material to	
	mation or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which subjects that person to criminal and civil populties (in Occasion the Commits and Civil populties).	aterially fals

se crime and may subject the person to penalties). (In New York, the civil penalty is not to exceed five thousand dollars (\$5,000) and the stated value of the claim for each such violation). (Not applicable in AL, AR, AZ, CO, DC, FL, KS, LA, ME, MD, MN, NM, OK, PR, RI, TN, VA, VT, WA and WV).