

# California Federation of Mineralogical Societies

## Change Request for Premises Liability and/or Property Coverages

### CURRENTLY INSURED LOCATIONS ONLY

To add premises liability or property coverage at a NEW location, use form:  
"Request for Premises Liability and/or Property Coverages".

Complete a separate form for each location with changes. Please mail this form and a check payable to McDaniel Insurance Services LLC, PO Box 1294, Ojai, CA 93024.

Legal Name of Club: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: day: \_\_\_\_\_ eve: \_\_\_\_\_ e-mail: \_\_\_\_\_  
Date request was: faxed \_\_\_\_\_ OR mailed \_\_\_\_\_ OR e-mailed \_\_\_\_\_

**Important Notes:** 1) This application does not guarantee coverage; coverage is subject to underwriting approval; 2) these rates are subject to change; actual rates will be determined by Chubb, and 3) processing fees are included in cost.

**PREMISES Liability Changes:** (This must be a currently covered location on the policy.)

The complete legal address/location of the premises: \_\_\_\_\_

**LIST ALL THE COVERAGE LIMITS YOU NOW WISH TO HAVE FOR THIS LOCATION.  
SEND WITH CHECK. (AT RENEWAL, SUBSTITUTE THIS FOR THE RENEWAL INVOICE)**

**Buildings:** Please indicate if you:

ALL LOCTIONS ARE RATED WITH A MINIMUM OF 50 SQ FT

own  rent/lease  have a space provided for your exclusive use

What is the total square footage of area you occupy: \_\_\_\_\_ x 0.53 = \$ \_\_\_\_\_  
(\$26.50 minimum)

**Land:** For changes of more than 1/4 acre, also complete a "Land Questionnaire"

own  lease/rent  manage Number of Acres: \_\_\_\_\_ x 1.01 = \$ \_\_\_\_\_

**Easement or Mining Claim Changes:** Number of Acres: \_\_\_\_\_ x 0.35 = \$ \_\_\_\_\_

**Optional PROPERTY Coverages:** (For fire, theft, etc., building and/or contents.)

Owned building or other structure: (replacement value, \$1,000 deductible) \$ \_\_\_\_\_ x .01 = \$ \_\_\_\_\_

'Business Personal Property' (office contents, lapidary equipment, etc.; \$1,000 deductible):

1. Furniture, equipment, supplies, other than below (replacement cost) \$ \_\_\_\_\_

2. Stock for sale (wholesale cost)..... \$ \_\_\_\_\_

TYPE OF MERCHANDISE: \_\_\_\_\_

3. Lapidary equipment (replacement cost)..... \$ \_\_\_\_\_

**Total of above 3 categories** (Business Personal Property) ..... \$ \_\_\_\_\_ x .008 = \$ \_\_\_\_\_

Computers (hardware & software; \$1,000 deductible) ..... \$ \_\_\_\_\_ x .01 = \$ \_\_\_\_\_

**Do not include trailers. Call with any questions.**

Subtotal \$ \_\_\_\_\_

**If "Total Due" is more than \$1,300, email McDaniel Insurance Services for discount.**

(Minimum of \$40.00) **Total Due** \$ \_\_\_\_\_

Signature of person completing the form: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

*McDaniel Insurance Services LLC* CA DOI Lic # 0K28791 [agent@mcd-ins.com](mailto:agent@mcd-ins.com) (800) 400-7288  
206 N. Signal Street, Suite O, PO Box 1294, Ojai, CA 93024 (805) 646-9948; Fax (805) 646-9976