



# Big Sky Underwriters

a division of Hull & Company, LLC

## Policy Change Request Property - **NON-OWNED** Building

Insured Name:

Effective Date of Change:

Policy Number

Endorsement Summary & Comments:

Building Usage (Church Services, Bible Study, School, Office, etc.):

Year Constructed:

Construction:

# of Stories:

Total True Square  
Footage:

Personal Property Value  
(contents):

Deductible:

Square Footage Used by  
Organization:

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### Inland Marine Coverage

Inland Marine Coverage

Limit:

Deductible:

YES

NO

Description / Schedule of Items with Values (include VIN / Serial #):

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**Additional Insured**

Additional Insured Name:	Mailing Address:
Form:	Charge:
Description of Operations:	Comments:

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**Loss Payee**

Loss Payee Name:	Mailing Address:
Reference / Loan #:	Item Value:
Form	Comments:
Item Description:	

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**Certificate Holder**

Certificate Holder Name:	Mailing Address:
Comments:	

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**Building Information**

Are any of the following required by the lease?:

If so, how  
much?

Property Damage Legal Liability

Building Glass Coverage

Building Property Coverage (BVS required)

None

Most recent use of building?:

List of all other occupancies in the building:

List adjacent exposures: