



BLUE OAK SPECIALTY INSURANCE SERVICES, INC
 2087 GRAND CANAL BLVD., SUITE 10
 STOCKTON, CA 95207
 PHONE (209) 473-8938 FAX (888) 504-8062
 EMAIL: apps@blueoakins.com
 CALIFORNIA LICENSE NUMBER 0J20766

DEALERS COASTAL PROPERTY INSURANCE APPLICATION

Date of Application	
Name of Dealership	
Mailing Address	

Contact Name:	Phone Number:	Email Address:	Fax Number:

Premises Information: (If more than one location attach schedule)

Location 1 Address	Street:	City:	State:	Zip:
--------------------	---------	-------	--------	------

Building	Occupancy	Year Built	No. of Stories	Sprinklered	Alarmed	Construction	Square Foot	Prot. Class	Distance to Coast
Loc. 1 Bldg. 1									
Loc. 1 Bldg. 2									
Loc. 1 Bldg. 3									

Values at Risk:

Description	Location 1 Building 1	Location 1 Building 2	Location 1 Building 3
Building			
Fixtures & Equipment			
Stock			
Business Income-Extra Expense			
Employee Tools			
Data Processing			

Limit \$	Per Occurrence
Deductible (Other than Wind): \$	
Deductible Wind: (% of Total Insured Values at time of Loss)	

Loss History (Attach Loss Runs):

Mortgage Holder Information

Name:	Address:	City:	State:	Zip:
-------	----------	-------	--------	------

PRODUCER INFORMATION

Producer Code	_____	Producer	_____
Agency Name	_____	Phone #	_____ Fax _____
Street Address	_____	City	_____ County _____
Email	_____	State	_____ Zip Code _____
Post Office Box	_____ City _____	State	_____ Zip Code _____