



NATIONAL SECURITY UNDERWRITERS, INC.

P.O. BOX 1358 • HAMMOND, LOUISIANA 70404
Phone: 866-295-8041 • Fax 866-378-3287

HOMEOWNER (HO-8) APPLICATION

Policy Period: From: _____ To: _____ Producer: _____

Applicant Name & Mailing Address: _____

Location of Premises (if different-explain) _____

Parish: _____

Phone No. _____

Social Security No. _____

D.O.B. _____

Applicant's Occupation: _____

Employer Name: _____ Yr Employ _____

COVERAGE/LIMITS OF LIABILITY

- A. DWELLING = 100% \$ _____
- B. OTHER STRUCTURES = 10%
- C. PERSONAL PROPERTY = 40%
- D. LOSS OF USE = 10%
- E. PERSONAL LIABILITY = \$25,000 INCL. (INCREASED LIMITS) _____ \$50,000 _____ \$100,000
- F. MED PAY = \$500 INCL. (INCREASED LIMITS) _____ \$1,000

PREMIUM \$ _____ POLICY FEE \$35.00 LA TAX \$ _____ TOTAL \$ _____ DOWN PMT \$ _____

(MINIMUM 25% OF PURE PREM. PLUS FEE & TAX REQUIRED)

DEDUCTIBLE: \$1,000 WIND/HAIL - \$500 AOP **5% Named Storm Deductible applies to Territories C & D**

RATING/GENERAL INFORMATION

_____ FRAME	_____ ONE STORY	_____ PROTECTION CLASS
_____ BRICK	_____ TWO STORY	_____ TERRITORY
OTHER: _____		
YR BUILT _____	SQ.FT _____	FAMILIES _____
RESPONDING FIRE STATION: _____		ROOF CONSTRUCTION: _____
DISTANCE TO FIRE HYDRANT: _____		MILES TO FIRE STATION: _____

YEAR FOR UPDATES

_____ WIRING _____ HEATING _____ PLUMBING _____ ROOF

MORTGAGEE NAME & ADDRESS:

BILL MORTGAGEE: YES / NO - LOAN # _____

NSU HO (01/10)

