



MUTUAL INSURANCE SERVICES

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EARTHQUAKE APPLICATION

Desired Effective Date: _____ (For one year) Bill Mortgagee Bill Insured (Down payment must accompany app.)

Name of Applicant: _____

Applicants Mailing Address: _____
 Number, Street, City, State, Zip, County

Location Address: _____
 (If different than mailing address)

Resident Phone Number: _____ Business Phone Number: _____

Mortgagee/Lienholder Contract Seller Additional Interest Loan Number(s): _____

#1) Name: _____

Address: _____

#2) Name: _____

Address: _____

Year Built: _____ Number of family units: _____ (Not acceptable if more than 4 family units.)

Construction Type: Frame (wood siding) Masonry Other: _____ Number of Stories: _____ Protection Class: _____

Is dwelling occupied? Yes No If Yes, is the dwelling: Owner Occupied _____, Tenant Occupied _____, or Seasonal _____

Is the applicant the owner of the home or a tenant? _____ If a tenant, please provide the name of the primary carrier for the applicant's contents: _____ **Please note: There is no coverage provided for the structure if the applicant is a tenant, coverage is for the tenants contents only.**

Please indicate if limit being purchased is for: Contents only, Structure only, or Structure & Contents

Earthquake Deductible: \$1,000 (Per separate occurrence)

		Rates			
All Zones Except King County, WA		Limits	\$ 10,000	\$ 25,000	\$ 50,000
Construction:	Frame, Steel, Metal	\$	196	\$ 280	\$ 420
	Brick Veneer	\$	231	\$ 331	\$ 496
	Masonry	\$	249	\$ 356	\$ 534
King County, Washington		Limits	\$ 10,000	\$ 25,000	\$ 50,000
Construction:	Frame, Steel, Metal	\$	264	\$ 378	\$ 567
	Brick Veneer	\$	312	\$ 446	\$ 670
	Masonry	\$	337	\$ 481	\$ 721

Premium \$ _____

Policy Fee* \$ **50.00**

State Taxes \$ _____

SLSC \$ _____

Total \$ _____

(Downpayment+policy fee+taxes/fees=Amount remitted) \$ _____

