

RLI INSURANCE COMPANY

Home Business Insurance Program Rating Worksheet

Applicant's Name: _____ Effective Date: _____

LOCATION DATA: State Code: _____ Zip Code: _____ BASE RATE
 Territory: 1, 2, or 3 Rate Group: A or B or Z= _____

The Basic Plan (base rate) includes: \$5,000 Business Personal Property on premises or temporarily off premises,
 \$300,000 Business Liability, Business Income and \$100 Deductible.

Total Business Personal Property (BPP) Amount: \$ _____

Business Liability Limits: ___ \$300,000 ___ \$500,000 ___ \$1,000,000

<u>OPTIONAL COVERAGES:</u>	<u>LIMIT or EXPOSURE BASE</u>	<u>RATE PER \$100 or FLAT RATE</u>	<u>ADDITIONAL PREMIUM</u>
LOCATION ONE BUSINESS PERSONAL PROPERTY (BBP) COVERAGE (in excess of \$5,000 included in base rate)	_____	x _____	= _____
LOCATION TWO BUSINESS PERSONAL PROPERTY (BPP) COVERAGE (total BPP coverage limits may not exceed the maximum limit of \$100,000)	_____	x _____	= _____
ADDITIONAL INSURED (charge per each additional insured)	_____	x _____	= _____
INCREASED LIMIT OF LIABILITY	_____ \$500,000	_____	= _____
	_____ \$1,000,000	_____	= _____
MONEY & SECURITIES	_____	_____	= _____
JEWELRY & WATCH INCREASED THEFT COVERAGE (\$250 Limit)	_____	_____	= _____
PREMIUM TOTAL (Base Rate + Additional Premiums)			= _____
COVERAGE FOR CERTIFIED ACTS OF TERRORISM (or submit a rejection form)			= <u>\$1.00</u>
FINAL TOTAL (Premium Total + Terrorism Charge)			= _____

Please refer to the In- Home Business Insurance Program Rating Guide, IBP 117,
 for premium calculation instructions.

For forms and applications, please contact Colleen Lahna, RLI Program Manager,
 at **800/ 742-6363** or email her at **clahna@massagent.com** or go to **massagent.com** ®