POLICY CHANGE FORM

Date ___________________________ Membership Number ___________________
Member ________________________________________________________________
Person Completing Form _________________________________________________

ADD TO or DELETE FROM (circle one)

AUTOMOBILE EQUIPMENT (circle one)

Year _____ Make __________ Model __________________________________________
Vin/Serial Number ______________________________________________________
Department ___________ Value _____________________________________________
Loss Payee _____________________________________________________________

*If adding a trailer, it should be listed as an auto if used on the road, if stationary or never on public roads it should be listed as equipment.

PROPERTY ADDITION or DELETION (circle one)

Name of Property _________________________________________________________
Address __________________________________________________________________
                     City ____________________________ Zip __________________________
Year Built _______ Square Footage _________ # of stories _________________
Percentage Sprinklered? _________ GPS Lat/Long __________________________
Type of Construction: 1 – 2 – 3 – 4 – 5 - 6 (circle one – see below for descriptions)
Type of Occupancy: Occupied / Unoccupied / Vacant / Structure Only / Contents Only (Circle one)
Building Value ______________________ Contents Value ____________________
Property in the Open Value & Description ______________________________________

*Property in the open = items not affixed to building, i.e. fencing, lighting, flagpole, bench, etc.

Construction Types:
1 = Frame
2 = Joisted Masonry
3 = Noncombustible
4 = Masonry Noncombustible
5 = Modified Fire Resistive
6 = Fire Resistive

KALF OFFICE USE ONLY

Added/Deleted Date ___________ KALF Representative ___________