



GUN FLOATER APPLICATION

Sportsman's Insurance Agency, Inc.



Name: _____ SCTP or SASP Member Number: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Daytime Phone Number: (____) _____ Home Phone Number: (____) _____
 E-mail Address: _____ Fax: (____) _____ Cell: (____) _____

PLEASE ANSWER THE FOLLOWING QUESTIONS

1. Are you travelling with your guns within the next 48 hours? Yes No If yes, please call us before applying.
2. Have you had any guns lost/stolen in the last five years? Yes No If yes, please explain _____

3. Do you have a central alarm system (fire and burglary)? Yes No
4. Do you have a gun safe? Yes No
5. Confirm that you have taken possession of all items scheduled for insurance Yes No
 (No coverage is provided for items unless you have taken possession of them.)

Effective Date Desired (must be after postmark date) _____, otherwise we use the day after postmark or fax receipt date provided all necessary underwriting information is present.

Please Note the Following:

- (a) *If necessary, values will be amended to reflect the MSRP on items still being manufactured.*
- (b) *We will use the value that you provide for guns no longer being manufactured, provided the value does not exceed the 95% condition value in the Blue Book of Gun Values.*
- (c) *The insurer's liability for a loss will not exceed the amount listed in the Schedule of Insured Articles.*
- (d) *If you are paying by credit card, the appropriate premium will be charged. If paying by check, any additional premium will be billed and any return premium will be sent to you along with your policy.*

Your signature acknowledges that the underwriter has the right to adjust values to reflect the Manufacturer's Suggested Retail Price on guns and optics still being manufactured.

SIGNATURE: _____ **Date:** _____

PREMIUM CALCULATION <i>List values from schedule</i>	
CATEGORY	Total Mfr. Retail Price
I. Guns and Cases	\$ _____
II. Custom work/Modifications	\$ _____
III. Scopes, Binoculars, Rings & Bases	\$ _____
IV. Tube Sets and miscellaneous items	\$ _____
TOTAL VALUES	\$ _____
\$ _____ Total Value x \$.0125 = \$ _____ annual premium	

Did you secure values from a phone conversation with us? Yes No

Method of payment:

- Check enclosed in the amount of \$ _____ Make Check Payable to: Sportsman's Insurance Agency, Inc.
 1364 North US 1, Suite 503
 Ormond Beach, FL 32174
- Bill my:
- MasterCard Visa Discover AmEx Card #: _____ Security Code _____

Expires: _____ Signature: _____ Billing address zip code: _____



Gun Floater Insurance



The Scholastic Shooting Sports Foundation has designed this Gun Insurance program specifically for the risks our program and supporting members incur. It is administered by our insurance advisors, Sportsman's Insurance Agency, and is underwritten by T.H.E. Insurance Company, an A.M. Best "A-" rated company.

Policy Features:

- World-Wide, All-Risk Coverage
- Primary Insurance
- No Deductible
- Below Market Rates - Only \$1.25 per \$100 of Insured Value
- Full Replacement Value (for items still being made)

Coverage: This is an annual policy and is specific insurance - each item you want to insure must be listed and have an insurable value placed on it. Coverage is available for firearms, scopes, cases, binoculars, holsters, extra stocks and barrels, chokes and tubes, and any custom work done to your firearms. Coverage can begin as early as the day after you apply online or mail, email or fax your completed application.

Determining Values: For firearms still being manufactured, the insurable value is the manufacturer's suggested retail price (MSRP.) For items no longer being made, you can use your own value provided that it does not exceed the 95% condition value in the Blue Book of Gun Values. Custom work, engraving, and modifications can be insured at their cost to you or at market. You can call Sportsman's for help in determining values.

To Apply: To obtain coverage, simply complete the application and fax, email or mail it. You also can apply on-line. Use the checklist below to make sure that your application is complete:

- Provide your membership number
- Provide a daytime telephone number in case we have any questions
- Answer questions 1-5
- Sign the application and enclose your check or credit card information
- Complete the schedule, including make, model/sub-model/grade, serial numbers, custom work, etc.

Your Policy: Normally, your Certificate of Coverage is issued within three business days. Delays occur when you do not submit complete information. Note that values will be amended to reflect the current MSRP, if appropriate. You will be billed any additional premium or refunded any return premium.

Claims: Sportsman's will help you submit any claims. In most cases, claims are resolved within 30 days. The policy requires that, if possible and economically feasible, the item be repaired. Otherwise, a new replacement item will be provided or, if the item is no longer available, you will receive a check.

I. GUNS AND GUN CASES

Complete this section with guns and accessories (sling, chokes, extra barrels)

Item	Make	Model/Submodel/Grade	Caliber or Gauge	Skeet/Trap / Field/ Sporting	Serial #	Accessories that you have paid extra for	Manufacturer's Retail Price
Example	Bentli	Supersport	12 Ga.		000000		\$2199
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							

Failure to provide all of the above information may result in your policy not being issued in a timely manner.

II. CUSTOM WORK

For Item #	List any custom work you want insured	Who did the custom work	Value of Custom Work
Example	Porting (\$80), lengthen forcing cone (\$75)	Ballistic Specialties	\$155.00
1.			
2.			
3.			
4.			
5.			

III. SCOPES, RINGS, BASES & BINOCULARS

Item	Make/Model	Power	Serial #	Mfr. Retail Price
Example	Leupold, VX-1 Shotgun	2 - 7 x33	0000000000	\$260.00
1.				
2.				
3.				
4.				
5.				
6.				

IV. TUBE SETS AND MISCELLANEOUS ITEMS

Item	Make/Model	Gauge	Mfr. Retail Price
Example	Briley Mfg, Ultralite Sub Ga. Tube Set	.410, 28, & 20	\$ 1750
1.			
2.			
3.			
4.			
5.			
6.			

CHECK LIST

Our goal is to issue your Certificate of Coverage within 72 hours after receiving your completed application. Delays occur when we do not have all of the information on the gun or other item to be insured such as make, model, submodel, serial number, etc.

Please affix postage here

Note: Values on guns still manufactured will be amended to reflect Manufacturer's Suggested Retail Price. We will use the value you provide on guns no longer being manufactured as long as the value does not exceed the 95% condition value in the Blue Book of Gun Values. You will be invoiced for any additional premium or refunded any return premium.

TO AVOID DELAYS IN ISSUING YOUR POLICY
PLEASE USE THE FOLLOWING CHECK LIST

DID YOU....

- Give us your member number.
- Answer questions 1 through 5 on the application.
- Give us a telephone number where we can reach you during the day if we need more information.
- Sign the original application.
- Enclose your check or credit card number. (including expiration date)
- Complete the schedule of items to be covered including make, model, sub-model (if applicable), grade, serial numbers, custom work, etc.
- List any custom work that you want insured.
- List any accessories you want insured such as scopes, binoculars, slings, chokes, etc.

800-925-7767

Local (386) 677-2588

Fax: (386) 677-3292

Bill@siai.net



Sportsman's Insurance Agency, Inc.

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1364 North US 1, Suite 503

Ormond Beach, FL 32174

www.siai.net

SSSFGFM716

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From _____

Gun Insurance

*A valuable benefit
for members
of the
Scholastic
Shooting Sports
Foundation
and its Programs*

