

## Insurance Policy Analysis Form

Prepared by: \_\_\_\_\_

Date prepared: \_\_\_\_\_

Insurance Policy Coverage Type: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Insureds: \_\_\_\_\_

Additional insureds: \_\_\_\_\_

Policy Term: \_\_\_\_\_

Premium: \_\_\_\_\_ Premium Basis: \_\_\_\_\_

Limits of Liability: \_\_\_\_\_

Co-insurance %: \_\_\_\_\_

Per Occurrence: \_\_\_\_\_

Per Aggregate: \_\_\_\_\_

Deductibles: \_\_\_\_\_

Property insured: \_\_\_\_\_

Insurance riders: \_\_\_\_\_

Exclusions:

1. \_\_\_\_\_

9. \_\_\_\_\_

2. \_\_\_\_\_

10. \_\_\_\_\_

3. \_\_\_\_\_

11. \_\_\_\_\_

4. \_\_\_\_\_

12. \_\_\_\_\_

5. \_\_\_\_\_

13. \_\_\_\_\_

6. \_\_\_\_\_

14. \_\_\_\_\_

7. \_\_\_\_\_

15. \_\_\_\_\_

8. \_\_\_\_\_

16. \_\_\_\_\_