

# UMBRELLA SUPPLEMENT

Please provide your current policy information for the policies you would like to have the umbrella coverage go over. **If no information is provided, the umbrella will be quoted over the General Liability only.**

**Auto:** \$1,000,000 minimum auto liability limit required

Insurance Company: \_\_\_\_\_

Policy Dates: \_\_\_\_\_ to \_\_\_\_\_

Liability Limit: \_\_\_\_\_

Liability Premium: \_\_\_\_\_  
(Liability premium only, do not include comp, collision, etc.)

Auto Breakdown: Provide the number of vehicles in each class

\_\_\_\_\_ Private Passenger

\_\_\_\_\_ Light Trucks (0-10,000 lbs.)

\_\_\_\_\_ Medium Trucks (10,001 to 20,000 lbs.)

\_\_\_\_\_ Heavy Trucks (20,001 to 45,000 lbs.)

**Employers Liability:** Part of Workers Compensation Policy

Insurance Company: \_\_\_\_\_

Policy Dates: \_\_\_\_\_ to \_\_\_\_\_

Employers Liability Limit: \_\_\_\_\_  
(\$500,000 / \$500,000 / \$500,000 minimum limit required)