



## ANDOVER COMPANIES REQUEST FOR CHANGE

EFFECTIVE DATE OF CHANGE

POLICY NUMBER	POLICY PERIOD FROM	TO	COVERAGE IS PROVIDED IN THE	AGENCY

NAMED INSURED AND ADDRESS	AGENT

CHANGE:       Name of Insured    P.O. Address    Described Premises    Rating Info.    Deductible  
 Property Limits    Mortgagee    Addl. Location(BOP-1 Required)    Direct Bill(1/3 Payment Required)  
 Liability Limits    Loss Payee    Addl. Insured(Specific Interest)    Other


CHANGE:

Building	Other Structures	Business Personal Property	Liability Limit Each Occurrence

ADD OR CHANGE: Endorsement (Form No., Limit)


DELETE: Endorsement (Form No.)


RATING INFORMATION NECESSARY FOR CHANGE:

Frame(1) Masonry(2) Non-Comb.(3) Masonry/NC(4) Mod. Fire Res.(5) Fire Res.(6)	Territory Code	Protection Class	Deductible	#Apts or Units	Year Built				

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AGENT'S SIGNATURE

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DATE