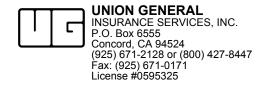


## CALIFORNIA TRAVEL TRAILER APPLICATION Rated A - Excellent, California Admitted Carrier



NAMED INSURED					REQUESTED POLICY TERM			
Name					From	To	Policy Term	Months
Address         State         Zip					For coverage to begin as requested, the application must be fully completed, signed and mailed within 48 hours of the effective date, otherwise coverage is bound 12:01 AM. the day received by the General Agent. No coverage may be bound or increased within 72 hours of the announcement of an impending disaster. i.e. hurricane, volcanic eruption. earthquake, flood, mudslide, brushfire, etc.			
County					PRODUCER			
PhoneGaraging or location (if different):					Name			
Caraging or locatio	ii (ii dilicici				Address			
Occupation					City	State	=Zip	
MarriedSingle/Separated Birthdate					Phone No. (	)	Code No	
ADDITIONAL INSURED				LIENHOLDER				
AD	DITIONAL	INSURED			Name			
Name					Address			
Address								
Address       City       State       Zip         Loan #								
DESCRIPTION OF TRAVEL TRAILER								
Serial Number	Width	Length	Year	Manufa	acturer/Model	Purchase Year	Purchase Price	Current Value
							\$	\$

Camping Trailer — Fifth Wheel

## TRAVEL TRAILER PACKAGE INCLUDES

Travel Trailer

- Personal Effects in the amount indicated in the Rate Chart
- 2. Fire Department Service Charge
- 3. Emergency Vacation Expense Coverage
- 4. Towing and Labor Costs Coverage
- Scheduled Medical Benefits Coverage
- 6. \$100 Deductible

Type of Unit\*

7. Worldwide Coverage

COVERAGE	AMOUNT	PREMIUM		
Travel Trailer Package	\$	\$		
Personal Effects	10%	Inc.		
OPTIONAL COVERAGE'S				
Add'l P.E \$1 per \$100	\$	\$		
Vacation Liability - \$10	10%	\$		
Secured Interest Protection -	\$			
Personal Effects		\$ 35		
Minimum Written	TOTAL			
And Retained - \$35	PREMIUM	\$		

Truck Mounted

Travel Trailer Value	Personal Effects	Package Premium	Travel Trailer Value	Personal Effects	Package Premium
0—2,000	200	49	10,001—11,000	1100	260
2,001—3,000	300	73	11001—12,000	1200	284
3,001—4,000	400	96	12,001—13,000	1300	308
4,001—5,000	500	119	13,001—14,000	1400	331
5,001—6,000	600	143	14,001—15,000	1500	355
6,001—7,000	700	167	15,001—16,000	1600	378
7,001—8,000	800	190	16,001—17,000	1700	402
8,001—9,000	900	214	17,001—18,000	1800	425
9,001—10,000	1000	238	18,001—19,000	1900	448
			19,001 & Over	Add per \$1,000	\$30

I hereby declare that the information provided on this application is true, complete and correct. I agree that this application shall constitute a part of any policy issued whether attached or not and any willful concealment or misrepresentation of a material fact or circumstance shall void any policy issued.

Applicant's Signature X	Date
Agent's Signature X	Date

## PRIVACY POLICY

I have received and read a copy of the "Aegis Security Insurance Company Privacy Statement". By submitting this application, I am applying for issuance of a policy of insurance and, at its expiration, for appropriate renewal policies issued by Aegis Security Insurance Company and/or other members of the Aegis Group of insurance companies. I understand and agree that any information about me that is contained in, or that is obtained in connection with, this application or any policy issued to me may be used by any company within the Aegis Group to issue, review, and renew the insurance for which I am applying.

Producer's Signature	_ Date
Applicant's Signature	Date

Great Mobile Home Programs available through Aegis Security For units in:

\*Preferred Parks Options

\*Standard Parks Flood and/ or Earthquake

\*Private Property Replacement cost- new for old

Also, coverage is available for Seasonal, Rentals, and Vacants.

Please note: **Outstanding Estate Program NOW AVAILABLE.** 

If you have any questions, please call us at 1-800-427-8447