

Insurance Technologies and Programs

A Division of Air Capital Insurance, LLC

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Weather Insurance Quotation Request

Coverage does not exist unless and until applicant's check covered by sufficient funds has been deposited and a binder or policy has been issued.

Name of Applicant: _____

Address of Applicant: _____

Name of Event: _____

Type of Event: _____

Location of Event: _____

Total Amount of Coverage Requested: _____

Date(s) of Event:

Hours of Coverage:

Amount of Coverage:

_____	From: _____ To _____	\$ _____
_____	From: _____ To _____	\$ _____
_____	From: _____ To _____	\$ _____

Measurement of Weather Peril:

Rain

Other

_____ 1/100" (.01)"	_____
_____ 1/10" (10)"	_____
_____ (.25)"	_____
_____ (.50)"	_____
_____ Other _____	_____

Claim Settlement Option: (Check One)

- A. Closest National Hourly Weather Station
 B. Independent Weather Observer on Location

Applicants:

Phone: _____ Fax: _____ Email: _____

Signature: _____ Date: _____