



Applicant Name:

Mailing Address:

Location Address:

Contact: Contact Email:

Contact Phone: Website:

General Information

1. Years in business: years Years of experience in the industry: years

2. States where the applicant operates:

3. Hours of operation:

4. Does the applicant currently have liability insurance? ☐ Yes ☐ No
If yes, please list carrier:
Current premium: \$

5. Has the applicant had any losses in the last five years? ☐ Yes ☐ No *Please include loss runs*

6. Are employees allowed to carry firearms while working?
☐ Permitted ☐ Required ☐ Other:

Premises Information

1. Does the applicant own any buildings? ☐ Yes ☐ No
If yes, does the applicant lease or rent space to others? ☐ Yes ☐ No
Number of apartments:
Square footage of leased space (not including apartments):

2. Please check all security measures that are in place to prevent burglary or theft:

☐ Barred Windows	☐ Motion Detectors	☐ Crash Barriers Outside of Building
☐ Burglar Alarms	☐ Smoke Detectors	☐ Barred Doors
☐ Gun Safe	☐ Fire Alarm	☐ Security Cameras
☐ Other:		

3. Are guns stored in a safe during non-operating hours? ☐ Yes ☐ No

4. Has the applicant ever had any theft or burglary for firearms? ☐ Yes ☐ No
If yes, please provide a full explanation, including date and what preventative measures have been taken place following each occurrence:

Federal Firearm License Information

1. What type of firearm license does the applicant hold:

☐ Type 01 ☐ Type 02 ☐ Type 03 ☐ Type 06 ☐ Type 07 ☐ Type 08 ☐ Type 09
☐ Type 10 ☐ Type 11

2. How long has the applicant been a licensed firearm dealer:

3. Has the applicant been cited under their firearm license? ☐ Yes ☐ No

If yes, please provide full details of the citation:

Gun Store Information

1. Total gross sales: \$

2. Please provide sales breakdown for each below (N/A if does not apply):

Gun sales	Job Cost		Job Cost
New Gun Sales	\$	Factory Ammo	\$
Used Gun Sales	\$	Reloaded Ammo	\$
Off Premises Gun Sales	\$	Rental Equipment	\$
Fully Automatic Weapon	\$	Other Sporting Goods	\$
Sporting Goods	Job Cost	Gunsmithing	Job Cost
Consignment Sales	\$	Gunsmith/Gun Repair	\$
Archery Equipment	\$	Bowsmithing	\$

Activities Information

1. How many gun shows attended each year:

2. Average distance traveled to a gun show:

3. What safety measures are taken to prevent theft of guns during travel to and from gun shows:

4. Is there a range on premises? ☐ Yes ☐ No

If yes, how many of lanes of each of the following: Rifle: Pistol: Archery:

Are all the range controllers certified? ☐ Yes ☐ No

Are range rules clearly posted? ☐ Yes ☐ No

Are participants required to sign a waiver? ☐ Yes ☐ No *If yes, attach a copy*

5. Are concealed Carry classes offered? ☐ Yes ☐ No

What are the total sales for conceal carry classes: \$

If contracted, what is the total cost: \$

How many instructors are involved in classes:

Describe qualifications and experience of instructors:

I DECLARE THAT THE STATEMENTS MADE IN THIS SUPPLEMENTAL ARE COMPLETE AND TRUE

Any person who, with the intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits a supplemental or files a claim containing a false or deceptive statement may be guilty of insurance fraud and subject to criminal and civil penalties. Any changes in your operation must be reported to your agent. **(Not applicable in MN, NY, OR, or WA)**

Minnesota: A person who submits an application or files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

New York: Any person who knowingly and with intent to defraud any insurance company or other person files an application for commercial insurance or a statement of claim for any commercial or personal insurance benefits containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, and any person who, in connection with such application or claim, knowingly makes or knowingly assists, abets, solicits or conspires with another to make false report of the theft, destruction, damage or conversion of any motor vehicle to a law enforcement agency, the department of motor vehicles or an insurance company commits a fraudulent insurance act, which is a crime, and shall be subject to a civil penalty not to exceed five thousand dollars and the value of the subject motor vehicle or state claim for each violation.

Oregon: Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Washington: It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

Insured's Signature:

Date:

Agents's Signature:

Date:

PRINT**Please submit completed application to your Independent Insurance Agent in electronic or printed format.****Western National Insurance Group****Central Region**

4700 West 77th Street, Edina, MN, 55435

Western Region

9706 4th Ave NE, Suite 200 Seattle, WA 98115

www.wnins.com

Umialik Insurance Company725 E. Firewood Lane, Ste. 500
Anchorage AK 99503

www.umialik.com

Michigan Millers Insurance

2425 E. Grand River Avenue, Lansing, MI 48912

Specialty Insurance Solutions

1600 Aspen Commons Ste 520, Middleton, WI 53562

www.mimillers.com