

State of Texas Master Fine Art Insurance Program SORM Inquiry

Willis Towers Watson Supplemental Fine Art Insurance Application

Before any question is answered read carefully the declaration at the end of this proposal which you are required to sign. Please answer all questions in full. Check YES/NO boxes.

SECTION 1: AGENCY INFORMATION

Agency Number: _____

Agency Name: _____

Location Address: _____

City: _____ County: _____ Post Code: _____

Check the type(s) that best describe your agency:

- | | |
|--|---|
| <input type="checkbox"/> Museum | <input type="checkbox"/> University |
| <input type="checkbox"/> Aquarium | <input type="checkbox"/> Museum or Gallery |
| <input type="checkbox"/> Arboretum/Botanical Garden | <input type="checkbox"/> Student Center/Union |
| <input type="checkbox"/> Art | <input type="checkbox"/> Library |
| <input type="checkbox"/> Children's/Youth | <input type="checkbox"/> Department of |
| <input type="checkbox"/> General | |
| <input type="checkbox"/> Historic House | <input type="checkbox"/> Cultural Organization |
| <input type="checkbox"/> History | <input type="checkbox"/> Library |
| <input type="checkbox"/> Natural History/ Anthropology | <input type="checkbox"/> Religious Institution |
| <input type="checkbox"/> Nature Center | <input type="checkbox"/> Civic/Exhibition Space |
| <input type="checkbox"/> Science | <input type="checkbox"/> Fair Building |
| <input type="checkbox"/> Zoo | <input type="checkbox"/> Other (specify): |
| <input type="checkbox"/> Other (specify): | |

Location Contact Name: _____

Telephone Number: _____ Email Address: _____

SECTION 2: BUILDING INFORMATION (Please note: A safety and security inspection may be required by the Insurance Company)

Location Address: _____

Type of Building Construction: Brick Frame Fire Resistive Other

Date Built: _____ Date Remodeled: _____

Was the building designed for a museum: Yes No

If not, please indicate original purpose: _____

SECTION 3: FIRE PROTECTION INFORMATION

Is the building: Fire Proof (non-combustible construction materials)
 Fire Resistive
 Treated with Fire Retardants

Is the building protected by a central station fire/smoke alarm system? Yes No

If yes, please describe: _____

Is the alarm system connected to the local fire department? Yes No

Are there any other approved fire suppression systems in place? Yes No

If yes, please describe: _____

SECTION 4: SECURITY INFORMATION

Are your premises protected by a central station burglar alarm? Yes No

Please describe your system (including make and installer): _____

Is the alarm system maintained under contract? Yes No

Number of guards when opened? _____ When closed? _____

SECTION 5: COLLECTION INFORMATION

PART A: Permanent Collection and Long Term Loans

The collection's approximate value including long term loans is: _____

Is your inventory up to date? Yes No

If no, when was it last updated? _____

Collection consists of (% of total):

_____ Oil on Canvas	_____ Sculpture	_____ Watercolors
_____ Photographs	_____ Indoor	_____ Drawings and works on paper
_____ Prints	_____ Outdoor	_____ Books/Manuscripts
_____ Artifacts	_____ Ceramics/Pottery	_____ Natural history specimens
_____ Antiques	_____ Other (specify): _____	

Is a list of the top ten highest valued objects in your collection with values attached to this application? Yes No

Willis of New York, Inc

Metro DC Office

12505 Park Potomac Avenue, Suite 300, Potomac, MD 20854

Telephone: 301-530-5050 Fax: 301-897-8506 Website: www.willistowerswatson.com

PART B: Temporary Exhibition Information

Frequency of temporary exhibitions on site: _____ per year

Average value of temporary exhibitions on site: \$ _____ per exhibition

Frequency of travelling exhibitions: _____ per year

Average value of travelling exhibitions: \$ _____ per exhibition

International venues: Yes No