

Insurance Check-Up

Please tell us about any changes that may have taken place to your buildings and property. In the last three years:

1. Has your organization acquired any buildings or land?
 Yes No
2. Has your organization sold or demolished any of its buildings?
 Yes No
3. Has your organization made improvements or added on to any of its buildings?
 Yes No
4. Has your organization installed fire alarm systems, burglar alarm systems, or sprinklers in any of its buildings?
 Yes No
5. Has your organization acquired any personal property items valued at \$5,000 or more?
 Yes No

Please tell us about your staff and volunteers.

6. How many people does your organization employ? Full Time _____ Part Time _____
7. Have you made any significant changes to your employment contracts and/or the employee handbook?
 Yes No We don't use them
8. How do you screen your employees before they are permitted to engage in ministry activities?
 Personal interview Written Application Criminal Background Check We don't screen
9. How do you screen your volunteers before they are permitted to engage in ministry activities?
 Personal interview Written Application Criminal Background Check We don't screen
10. I would like my agent to provide me with more information about background screening.
 Yes No

Please tell us about your ministry activities.

11. Has your organization started any significant ministries or activities in the last three years?
 Yes No
12. Does your organization sponsor any programs or activities that could be considered unusual for an organization of that type and size?
 Yes No
13. Please mark any of the following activities that your ministry is engages in:
 Foreign mission trips Sports leagues Skateboarding on your property
 Domestic trips (More than 3 days) Fireworks displays or sales Major Construction/Demolition Project
14. Are you aware of any situation that has not been reported to Brotherhood Mutual that could result in a lawsuit against your organization?
 Yes No
15. How many vehicles does your organization own? _____
16. How many days each year does your organization rent vehicles?
 Never 0 - 20 21 - 45 46 +

Please return this form to your agent.

For agent use only:

This form cannot be used to change the Policy. A formal change request must be submitted.

- Changes made - PCR to follow No changes made

 Person Interviewed

 Title or Role Date

 E-mail

 Phone Number (Please Include Area Code)

 Agent

 Date