



Property Change Form - Personal or Commercial

In order to make a change to your legal document, or policy, companies require your request in writing. Fax to Mosinee Insurance 715-693-2538.

Add/Delete a Property

Insured Name _____ Requested by _____
Phone Number _____ Fax _____
Effective Date _____ Building Value \$ _____

Address of Property _____
Owner _____
Age _____
Type of Construction (masonry, frame, fire resistant) _____
Year of Any Improvements _____
(heating, wiring, plumbing, roof, additions)
Type of Heat (gas, fuel oil, electric, wood) _____
Occupancy (warehouse, retail, apartments) _____
Square Footage _____
Number of Stories _____
Unattached Buildings _____
Sprinkler Building _____
Fire/Burglar Alarm Type _____

Mortgage Information

Lease/Loan Co.: _____
Street Address: _____
City, State, Zip: _____