



(This form required on all new and renewal submissions to FUSA)

FUSA SUBMISSION CHECKLIST

To: Farmers Union Service Association

Fax (800) 822-2214

Agent Name _____ Date _____

Insured Name _____

Desired Effective Date _____

New Business

Renewal

Coverage Requested _____

Policy Non-renewed or Cancelled No Yes Why? _____

**The following must be completed on all accounts before FUSA will forward for a quote!
Please indicate if not applicable on the account. (n/a)**

Completed Acord Applications (Please include years in business!)

Completed Supplemental Applications

Current Company Loss Runs for the current year plus 3 previous years (exception new in business)

Expired Premium and Exposure by line (exception new in business)

List and Describe all named insureds or operations

Short Narrative of Operations: _____

The following will be required when writing auto or property lines.

Pictures of Property and/or Diagram with distances

Driver List with License #'s & MVR's

FARMERS UNION SERVICE ASSOCIATION
COLORADO-WYOMING
5655 S. Yosemite, Suite 470 • Greenwood Village, 80111-3218
Phone: (303) 752-5803 • Fax: (303) 752-5807