

Barrett & Associates Inc.

**Manufactured Home / Recreational Vehicle Retailer's
Monthly Report of Values**

Failure to accurately report values as required by the policy may reduce the amount of recovery in event of a loss.
(Values reported must include manufactured homes or RV's owned and used by the Retailer in the business)

LOCATION	ACTUAL CASH VALUE				RATE	Monthly Premium	
	Non-Motorized		All Other				
	No.	Value	No.	Value			
1							
2							
3							
4							
5							
6							
7							
Total Inventory							
					Taxes & Fees (Multiply Premium)		
					Total (Round to nearest whole dollar)		

IMPORTANT NOTICE

All reports must be completed and submitted no later than the 10th day of the following month. Delinquent reports or failure to report all insured inventory will subject policy to possible cancellation.

THIS REPORT MUST BE SIGNED BY THE INSURED OR AN OFFICER OF THE FIRM OR CORPORATION.

I/We hereby certify, in accordance with the conditions of the policy of and required by the forms attached thereto, that the information herein is correct as of the last business day of _____, _____.

I/We hereby agree that the Company acceptance of a delinquent report shall not be prejudicial to the Company's right under the reporting clause of the MH/RV Retailer's Coverage and shall not be deemed a waiver of the reporting requirement of such clause.

Barrett & Associates, Inc. 3883 S. Telegraph Rd, Suite 110 Bloomfield Hills, MI 48302 Fax (248) 283-0251 devrab@ba-insurance.com Policy Number _____	Signature _____ Insured (Title) Signature _____ Agent (Title) _____ Named Insured
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