# **ProCentury Insurance Company**

## **COMMERCIAL OCEAN MARINE DECLARATIONS** PIERS AND WHARVES COVERAGE

**POLICY NUMBER: NAMED INSURED:** SCHEDULE OF LOCATIONS AND PROPERTY COVERED: Location Dock No. **Address Property Description** No. **COVERAGE:** Location Dock No. Valuation Coinsurance **Dock Limit** Rate **Premium** No. Business Location Dock No. **Personal Premium** Rate No. **Property Limit** 

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### **DEDUCTIBLE(S)**:

Loc. No. Dock No. AOP Windstorm; Flood; Wave Action Weight of Ice / Snow Other

#### PREMIUM:

Subtotal for this Coverage Part: \$
TRIA Coverage: \$
Premium for this Coverage Part: \$
Minimum Premium for this Coverage Part: \$

FORMS AND ENDORSEMENTS (other than applicable Forms and Endorsements shown elsewhere in the policy):

Forms and Endorsements applying to this Coverage Part and made part of this policy at the time of issue:

See attached Schedule of Forms, CIL 1500b



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