



## PREMIUM AND LOSS SUMMARY

**Applicant Name:** \_\_\_\_\_

<b>LIABILITY</b>								
Insurance Co. & Policy	Valuation Date	Policy Term	Premium	# of Units	# of Losses	PAID	RESERVES	Loss Ratio
<b>TOTALS</b>								

<b>PHYSICAL DAMAGE</b>								
Insurance Co. & Policy	Valuation Date	Policy Term	Premium	# of Units	# of Losses	PAID	RESERVES	Loss Ratio
<b>TOTALS</b>								

<b>CARGO</b>								
Insurance Co. & Policy	Valuation Date	Policy Term	Premium	# of Units	# of Losses	PAID	RESERVES	Loss Ratio
<b>TOTALS</b>								