

Consent to Higher Rate Filing Under N.J.S.A. 17:29A-7.1 (Chapter 214, P.L. 1962)  
New Jersey Department of Banking and Insurance - Other Than Automobile or Fire and Allied Lines

Company \_\_\_\_\_  
Name and Address \_\_\_\_\_  
Insured \_\_\_\_\_  
Name and Address \_\_\_\_\_  
Agent or Broker \_\_\_\_\_  
Name and Address - Reference No. \_\_\_\_\_

Coverages Applied For	Class	Terr.	Limits	Deductible	Other	Premium		Payable
						Normal	Add'l.	
TOTALS								

Policy Effective Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Policy No. \_\_\_\_\_

Comments: \_\_\_\_\_

Statement by Insured: I consent to the premium shown as "Premium Payable" on this application which is higher than would normally apply because of the greater hazard involved.

\_\_\_\_\_  
Signature of Insured Date

Statement by Company and Producer: Under penalty of N.J.S.A. 17:29A-16 and N.J.S.A. 17:29A-22, I declare that this application was fully completed as shown, before signed by the applicant.

\_\_\_\_\_  
Signature of Licensed NJ Producer Date

\_\_\_\_\_  
Producer License # Expiration Date

\_\_\_\_\_  
Signature of Company Representative Date