

CAMPUS: \_\_\_\_\_

R.F.I. # \_\_\_\_\_

**UNIVERSITY OF CALIFORNIA  
MISCELLANEOUS PROPERTY PROGRAM**

**PRIOR APPROVAL - REQUEST FOR INSURANCE - EXCESS FORM**

Date of Request: \_\_\_\_\_

Attachment to Request for Insurance (RFI/form 1300) No. \_\_\_\_\_ Dated: \_\_\_\_\_

Location of Property While Insured: \_\_\_\_\_

\_\_\_\_\_

**TRANSPORTATION & PACKING DETAILS** (If Applicable):

Weight of Shipment: \_\_\_\_\_ No. Of Pieces (Containers, etc): \_\_\_\_\_

Highest Value of Any One Container: \$ \_\_\_\_\_ Packed By: \_\_\_\_\_

Name of Carrier(S) - Between What Points: \_\_\_\_\_

\_\_\_\_\_

Include any pertinent information not described on attached RFI Form: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Requested By: \_\_\_\_\_

(Insurance & Risk Coordinator)

\*\*\*\*\*

**TO BE COMPLETED BY SAYLOR & HILL:**

Requirements/Conditions of Approval: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

(Saylor & Hill Co./Insurance Co.)

Rates Applied: \$ \_\_\_\_\_ Period of Insurance: \_\_\_\_\_

PREMIUM CALCULATION/TOTAL AMOUNT INSURED:

\_\_\_\_\_

\_\_\_\_\_

ORIGINAL TO: Saylor & Hill Co., 1939 Harrison St., Suite 201, Oakland, California, 94612

(Revised 10-1-81)