

# ACORD™ ADDITIONAL INTEREST

DATE (MM/DD/YY)

AGENCY	PHONE (A/C, No, Ext): (619)661-0505	APPLICANT (First Named Insured)		PHONE (A/C, No, Ext):		
	FAX (A/C, No): (619)661-0506					
Windfall Insurance Services, Inc. 2335 Roll Dr. #6 San Diego, CA 92154		EFFECTIVE DATE	EXPIRATION DATE	CO/PLAN		
CODE:	SUB CODE:					
AGENCY CUSTOMER ID		POLICY NUMBER:				
		ACCOUNT NUMBER:				
INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	<input type="checkbox"/> CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER	
<input type="checkbox"/> ADDITIONAL INSURED					LOCATION:	BUILDING:
<input type="checkbox"/> LOSS PAYEE					VEHICLE:	BOAT:
<input type="checkbox"/> MORTGAGEE					SCHEDULED ITEM NUMBER:	
<input type="checkbox"/> LIENHOLDER					OTHER	
<input type="checkbox"/> EMPLOYEE AS LESSOR						
		ITEM DESCRIPTION:				
INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	<input type="checkbox"/> CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER	
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