

Application for TCA Insurance Program

Please print all information. Make checks payable to J. A. BASH & COMPANY and mail with this completed application to:
J.A. Bash & Company, 300 Mt. Lebanon Boulevard, Suite 225, Pittsburgh, PA 15234-1509

Member Name _____ TCA# _____

Address _____

A. Blanket Coverage - Maximum value under \$200,000 total and \$5,000 per item

Limit \$ _____ x .0075 = \$ _____ Blanket Coverage Premium

B. Inventory Coverage - Please submit schedule

Limit \$ _____ x .0060 = \$ _____ Inventory Coverage Premium

C. Layout Coverage (Excluding rolling stock)

Limit \$ _____ x .0060 = \$ _____ Layout Coverage Premium

Note: all premiums should be rounded to the nearest dollar.

TCA Fees: Blanket Form - \$10; Schedule form under \$50,000 - \$25; All other - \$35

Premium Calculated Above (\$100 minimum) \$ _____ + TCA Fee _____ = \$ _____ Total Premium and TCA fee

**Premium savings may be available if you accept a higher deductible or have an acceptable security system. Call or write for details.
Policy is effective upon receipt of application! payment and approval by Peerless Insurance.**