

NARRATIVE FORM

This form is used to provide a detailed summary of an insured's operations, risk management measures, and other relevant information for underwriting evaluation.

The primary focus is on the insured's **Description of Operations** and **Loss Control and Safety Programs**, as these are critical factors in assessing the account.

Complete each section as thoroughly as possible to ensure a clear and accurate representation of the risk.

1. Description of Operations

- Provide a detailed overview of the insured's operations.
- If this is a **new business**, use historical policy classification codes to understand past and present activities.
- Review and include the **company's website link** if available.
- Do not copy and paste website content; underwriters will review it independently. Instead, summarize key details and address any potential underwriting concerns.

Website Link: _____

2. Loss Control & Safety Programs

Attach all relevant documents related to:

- Loss control measures
- Safety program details (e.g., meetings, protocols, training)
- Physical plant and equipment details

If there were past losses:

• Explain how current safety programs address and prevent similar issues.

Attachments:

- Loss Control Documentation
- Safety Program Manuals
- Equipment & Maintenance Records

3. Additional Relevant Information

A. Management Information

- Provide details on ownership, management, and leadership team, including:
 - Owner bios
 - Experience and expertise
 - Education and industry involvement

B. Employee Information

- Highlight key workforce details:
 - Low turnover? □ Yes □ No



- Long-term employees? \Box Yes \Box No
- \circ Specialized expertise? □ Yes □ No

C. Additional Comments

- Explain any loss experience, risk management perspectives, or unique risk factors.
- If any policy, audit, or loss run data needs **further clarification**, provide an explanation.

Comments:



