



## Check Casher Application

First Named Insured: \_\_\_\_\_  
*(Please attach list of any additional insureds to be included for coverage)*

Address: \_\_\_\_\_  
 \_\_\_\_\_

Effective Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

INSURING AGREEMENT	LIMIT OF INSURANCE	DEDUCTIBLE
1. Employee Theft		
2. Forgery or Alteration		
3. Inside the Premises – Theft of Money and Securities		
4. Inside the Premises – Robbery and Safe Burglary		
5. Outside the Premises		
6. Computer Fraud		
7. Funds Transfer Fraud		
8. Money Orders and Counterfeit Money		

**PRIOR INSURANCE:**

1. Has any similar insurance been declined or cancelled during the past three years?  Yes  No  
 2. Current Crime Coverage: Check here if none:

EFFECTIVE DATE	EXPIRATION DATE	LIMIT OF INSURANCE	CARRIER	PREMIUM

**BUSINESS DESCRIPTION:**

1. Date of Establishment: \_\_\_\_\_  
 2. Has there been any change in ownership or management within the past three years?  Yes  No  
 If "Yes", please explain: \_\_\_\_\_

**LOSS HISTORY:**

Enter all claims or occurrences that may give rise to claims for the past five years. **Check here if none:**

DATE OF OCCURRENCE	TYPE/DESCRIPTION OF OCCURRENCE OR CLAIM	AMOUNT OF LOSS	AMOUNT PAID	CLAIM STATUS (OPEN OR CLOSED)

Comments/Corrective Action taken: \_\_\_\_\_  
 \_\_\_\_\_

**OPENING AND CLOSING PROCEDURES:**

1. Describe your opening and closing procedures: \_\_\_\_\_  
 \_\_\_\_\_  
 2. How many people are involved with opening and closing? \_\_\_\_\_  
 3. Are there any armed personnel at opening and closing each day? \_\_\_\_\_

	YES	NO
<b>PHYSICAL PROTECTION:</b>		
1. Is there a double door or single person mantrap, bullet resistant entry system at each location?	<input type="checkbox"/>	<input type="checkbox"/>
2. Is there a floor to ceiling bandit and bullet resistant enclosure at each location?	<input type="checkbox"/>	<input type="checkbox"/>
3. Is there a UL Central Station premises alarm – grade A or better – at each location?	<input type="checkbox"/>	<input type="checkbox"/>
4. Is there a Class E, TL-15, TL-30 or better safe at each location?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are all safes connected Central Station Alarm system?	<input type="checkbox"/>	<input type="checkbox"/>
6. Are central station hold-up alarms utilized at all locations?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are hold-up alarms utilized at each teller window?	<input type="checkbox"/>	<input type="checkbox"/>
8. Are portable alarms utilized?	<input type="checkbox"/>	<input type="checkbox"/>
9. Are video camera systems utilized at all locations?	<input type="checkbox"/>	<input type="checkbox"/>
10. Are any other security devices utilized – motion detectors, etc.?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, provide details _____		
<b>EXTERNAL EXPOSURES:</b>		
11. Do you cash any checks while away from your premises?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please explain the process _____		
12. Do you transport cash between owned locations?	<input type="checkbox"/>	<input type="checkbox"/>
13. Do you own any armored vehicles?	<input type="checkbox"/>	<input type="checkbox"/>
14. Do you ever transport cash and/or checks in unarmored vehicles?	<input type="checkbox"/>	<input type="checkbox"/>
If so, please explain how often, the values carried and the physical protection utilized? _____		
15. Do you utilize an armored car service for cash deliveries to your store?	<input type="checkbox"/>	<input type="checkbox"/>
16. Do you utilize an armored car service for your bank deposits?	<input type="checkbox"/>	<input type="checkbox"/>
17. What is the frequency of your deposits? _____		
18. What is your average deposit size? _____ Minimum? _____ Maximum? _____		
19. What is the make up of each deposit? Cash? _____ % Cashed Checks? _____ %		
20. In the event of a loss, what percentage of cashed checks can be duplicated (re-constructable)? _____ %		
<b>INTERNAL CONTROLS:</b>		
21. Are all checks stamped “For Deposit Only” upon receipt?	<input type="checkbox"/>	<input type="checkbox"/>
22. Are there any types of checks that are not cashed immediately?	<input type="checkbox"/>	<input type="checkbox"/>
23. What forms of identification (ID) do employees check prior to cashing checks?	<input type="checkbox"/>	<input type="checkbox"/>
24. How often is an inventory of money performed at each location? _____		
25. Is a photographic check recorder or other form of scanning used?	<input type="checkbox"/>	<input type="checkbox"/>
26. Are locks and combinations changed when employees terminate employment?	<input type="checkbox"/>	<input type="checkbox"/>
27. Are bank accounts reconciled monthly?	<input type="checkbox"/>	<input type="checkbox"/>
28. Does someone not authorized to deposit or withdraw reconcile bank accounts?	<input type="checkbox"/>	<input type="checkbox"/>
29. Is countersignature of all company checks required?	<input type="checkbox"/>	<input type="checkbox"/>
30. Is there a limit that does require countersignature? _____	<input type="checkbox"/>	<input type="checkbox"/>
31. If no countersignature, who has the authority to sign company checks? _____		
32. Describe your employee screening procedures (criminal checks, previous employment, etc): _____		
33. Are credit checks performed on prospective employees?	<input type="checkbox"/>	<input type="checkbox"/>
34. Are credit checks performed periodically on existing employees?	<input type="checkbox"/>	<input type="checkbox"/>
35. Is drug testing done before employees are hired?	<input type="checkbox"/>	<input type="checkbox"/>
36. Is random drug testing done once employed?	<input type="checkbox"/>	<input type="checkbox"/>
37. Describe what type of training new employees receive: _____		
38. Do employees receive an employee handbook or manual including security and other procedures?	<input type="checkbox"/>	<input type="checkbox"/>
39. Do employees receive any type of commission or bonuses related to the volume of checks cashed?	<input type="checkbox"/>	<input type="checkbox"/>

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**Applicant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

<b>ALASKA</b>	A person who knowingly and with intent to injure, defraud, or deceive an insurance company files a claim containing false, incomplete, or misleading information may be prosecuted under state law.
<b>ARIZONA</b>	For your protection Arizona law requires the following statement to appear on this form. Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.
<b>ARKANSAS</b>	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
<b>CALIFORNIA</b>	For your protection, California law requires that you be made aware of the following: Any person who knowingly presents false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.
<b>COLORADO</b>	It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.
<b>DISTRICT OF COLUMBIA</b>	<b>WARNING:</b> It is a crime to provide false, or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.
<b>HAWAII</b>	For your protection, Hawaii law requires you to be informed that any person who presents a fraudulent claim for payment of a loss or benefit is guilty of a crime punishable by fines or imprisonment, or both.
<b>IDAHO</b>	Any person who knowingly, and with intent to defraud or deceive any insurance company, files a statement of claim containing any false, incomplete or misleading information is guilty of a felony.
<b>INDIANA</b>	Any person who knowingly and with intent to defraud an insurer files a statement of claim containing any false, incomplete, or misleading information commits a felony.
<b>LOUISIANA</b>	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
<b>MAINE</b>	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines, or a denial of insurance benefits.
<b>MINNESOTA</b>	Any person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.
<b>NEW HAMPSHIRE</b>	Any person who, with a purpose to injure, defraud or deceive any insurance company, files a statement of claim containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20.
<b>NEW MEXICO</b>	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

<b>NEW YORK</b>	Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.
<b>OHIO</b>	Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.
<b>OKLAHOMA</b>	WARNING – Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.
<b>OREGON</b>	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents materially false information in an application for insurance may be guilty of a crime and may be subject to fines and confinement in prison.
<b>PENNSYLVANIA</b>	Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.
<b>TENNESSEE</b>	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.
<b>VIRGINIA</b>	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.
<b>WASHINGTON</b>	It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

