**Named Insured Chart**

## Fill In Areas

Which single name is the controlling/parent entity or name?

Which entity will be listed as the First Named Insured on the policy?

|  |
| --- |
| ***Please complete the table and give description of operations for each entity.*** |
| **List all sub-names below.** | **Percent Owned** **by****Controlling Entity?** | **Named** **Insured’s****Control***(active management?)* | **How is it listed on the GL & Auto****Policies?**A. Named InsuredB. Add’l. InsuredC. Not Listed | **What is their insurable interest?****Does this insured own any properties not covered by this policy?** | **Relationship to Named Insured****and****Description of Operations** |
| 1       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 16       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 17       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 18       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 19       |      % | [ ]  | Yes | [ ]  | No | [ ]  | A | [ ]  | B | [ ]  | C |       |       |