



NRA

NRA Endorsed Property & Casualty Insurance Program
No One Understands Firearm Insurance Better

Gun Collectors Excess Insurance Change Form

Name _____ Coverage Number _____

Address _____ Effective Date of Change _____
Note: Date cannot be earlier than the date your request is received in our office.

City _____ Telephone Number _____

State, Zip _____ Email _____

All scheduled coverage is subject to underwriting approval.

Underwriter will require an original appraisal on:

- 1) Any item of \$20,000 or more in value **or**
- 2) Any item you wish to insure for more than blue book (actual cash value).

- ROUND TO THE NEAREST \$100 -

Current Total Coverage: \$ _____

New Total Coverage: \$ _____

PLEASE MAKE THE FOLLOWING CHANGES TO MY CURRENT COVERAGE: *(Use a separate piece of paper as necessary.)*

A. Add the following firearms to my current scheduled coverage: (see requirements)

Make	Model	Caliber/Gauge	Modifications & Accessories	Insured Value <small>(round each item up to nearest \$100)</small>
1.				
2.				
3.				
4.				
5.				

B. Delete the following firearms from my current scheduled coverage: (see requirements)

Make	Model	Caliber/Gauge	Modifications & Accessories	Insured Value <small>(round each item up to nearest \$100)</small>
1.				
2.				
3.				
4.				
5.				

C. Revise the following firearms on my current scheduled coverage: (see requirements)

Make	Model	Caliber/Gauge	Modifications & Accessories	Insured Value <small>(round each item up to nearest \$100)</small>
1.				
2.				
3.				
4.				
5.				

Premium Rate: \$0.67 per \$100. You will be billed or credited the difference in the premium.

SIGN & DATE

Signature **X** _____ Date **X** _____

Mail, email or fax changes to:

NRA Endorsed Insurance Program	1-877-NRA-3006 (1-877-672-3006), Option 3
P.O. Box 874952	Fax: 913-652-7599
Kansas City, MO 64187-4952	NRAInsurance@LocktonAffinity.com