

COMMONWEALTH OF KENTUCKY - DIVISION OF STATE RISK & INSURANCE SERVICES
REQUEST FOR PROPERTY / CONTENTS INSURANCE TERMINATION

STATE AGENCY / DIVISION

PROPERTY ID #

CERTIFICATE #

DATE OF REQUEST

APPRAISAL eMARS #

1. GENERAL INFORMATION

BUILDING / STRUCTURE NAME

YEAR BUILT/ACQUIRED

STREET / ROAD

CITY

COUNTY

ZIP

SPRINKLER SYSTEM ?

YES

NO

LEASED ?

YES

NO

2. REASON TO REMOVE FROM INSURANCE COVERAGE

BUILDING RAZED / DEMOLISHED ** (date)

TUNNEL ?

YES

NO

PURCHASED BY ANOTHER STATE AGENCY / DIVISION (list)

New Contact Person / Agency / Division

SOLD TO COUNTY, CITY or PRIVATE OWNER (no longer under State Government control)

LIST

NO INSURED VALUE (NIV) DETERMINED BY STATE RISK (agency approved) *Please submit a photo.*

(This TERMINATION may result in continued minimal depreciated coverage to fund cleanup costs at time of a future loss)

3. AGENCY CONTACT INFORMATION (Per the originator of this Termination Request)

CONTACT APPROVAL

PHONE NUMBER

EMAIL ADDRESS

COMMENTS

Note: This termination request will not become effective until documented date of receipt by State Risk.

**** 4. DEMOLITION CERTIFICATION**

- By submitting this form you certify this structure is no longer a Commonwealth of Kentucky asset and has been completely demolished/removed and is no longer physically standing.
- Attach the Finance Demolition Order obtained through the Division of Real Properties.

*** eMail -or- Mail your Completed Form ***Click button or email to: StateRiskUnderwriting@ky.gov**Division of State Risk & Insurance Services**

500 Mero St., 1st Floor

Frankfort, Ky 40601

(502) 564-6055