

BUSINESS OVERHEAD EXPENSE WORKSHEET

When completing this worksheet, keep in mind that as a general rule, if a regular and normal business expense incurred in the operation of the proposed insured business owner's office or place of business will continue (because of contractual obligations or the necessity of the expense for maintenance) after that person becomes disable, that expense will most likely be covered. However, if the expense is income-generating, is for a new capital improvement or increases the net worth of the business, it most likely will not be covered.

Type of Business	Normal Monthly	Type of Business	Normal Monthly
Overhead Expense	Outlay	Overhead Expense	Outlay
Rental Real Estate Depreciation, or Business Mortgage Principal		8. Professional license & dues	\$
(show only one) 2. Utilities	\$	9. Business-related loan interest including business-related mortgage interest	\$
a. Heat	\$		Ψ
b. Power	\$	the lesser of 50% of the proposed insured business owner's salary or 50% of all other eligible expenses) 11. Either business-related depreciation or payment on loan principal (show one or the other but not both)	
c. Water/Sewer	\$		
d. Fixed Telephone/Fax	\$		\$
3. Compensation of employees (including members of the proposed	—		\$
insured owner's immediate family who have been continuously employed by the business for at least 90 days)		 Car, truck & equipment leases (any portion of lease which is for personal usage is not covered) 	\$
NOTE: Compensation to partners is not covered in overhead expense.	\$	13. Telephone answering service and/or mobile paging system	\$
4. Business related taxes (only those payrolls taxes and social security		14. Security systems	\$
payments that relate to employees that are not members of proposed		15. Payroll services	\$
insured owner's immediate family		16. Billing service	\$
covered unless the family member has been continuously employed by		17. Collection service	\$
the business for at least 90 days)	.	18. Publications - Business	\$
a. Payroll	\$	- 19. Janitorial services	\$
b. Property	\$	- 20. Laundry - Business	
c. Social Security d. Misc. business taxes	4	-	\$
d. MISC. pusiness taxes	\$	21. Postage - Business -	\$
5. Business-related insurance		22. Business forms & supplies (except	
a. Property & Casualty	\$	stock for resale) -	\$
 b. Malpractice (which does not provide for waiver of premium) 	\$	- Total monthly overhead expense	\$
c. Employee Benefit Plans (only those benefit plan contributions that		Total monthly business income	\$
relate to employees that are not members of proposed insured owner's immediate family are covered unless the family member has been continuously employed by the business for at least 90		*Only those accounting and attorney's fees that are regular and normal business expenses incurred in the operation of the proposed insured owner's office or place of business that will continue (becaut of contractual obligations or the necessity of the expense for maintenance) after that person became disabled will be covered.	
days) 6. Accounting Fees*	\$ THIS IS NOT AN INSURANCE POLICY. The above in informand is to be used for underwriting purposes only. The info		nly. The information
_	\$	disclosed does not imply coverage. If a policy is issued, that policy will determine which expenses are covered and which expenses a	
7. Attorney's Fees*	\$	not covered.	