RURAL FIRE PROTECTION INSURANCE CARD Village of South Jacksonville Fire Department, 301 Dewey Drive, South Jacksonville, Illinois 62650 Phone: 217-245-4803 ❖ Fax: 217-243-7364 To Agent: Please fill in this card as completely as possible. Agent signature and next renewal date MUST be filled in. If this is a new application, your client's rural fire coverage will become effective within three business days of our receipt of the application form, this insurance card, and the fire protection fee. Please check one: A \$500 Fire Response clause has been □ added renewed to the insurance policy of below: Name of Insured: Policy Number: 911 Address: NEXT RENEWAL DATE: (MUST BE FILLED IN) City, State, Zip: Tenant's Name: (if applicable) Water Supply (wells, ponds, etc.): Hazards on Property (propane tanks, etc.) Insurance Company: AGENT'S SIGNATURE (MUST BE FILLED IN): Agent's Name: Company Phone: Company Address: Company Fax:

City, State, Zip: