



Insured \_\_\_\_\_ Date: \_\_\_\_\_

**GENERAL INFORMATION**

\_\_\_\_\_ Year Built When were the following updates performed?

Heating: \_\_\_\_\_

Electrical: \_\_\_\_\_ Is wiring aluminum? \_\_\_\_\_ (Aluminum wiring is prohibited)

Plumbing: \_\_\_\_\_

**Total # of units: \_\_\_\_\_ How many units have the following exposures?**

# \_\_\_\_\_ Condominium Units \_\_\_\_\_ #Townhouse Units \_\_\_\_\_ #Single Family Homes

# \_\_\_\_\_ Assisted living, adult foster care, halfway house, homeless shelter or rehabilitation centers (All prohibited)

# \_\_\_\_\_ Timeshares (Prohibited under Condo program – may be eligible under another class)

# \_\_\_\_\_ Units rented versus owner occupied

- Have there been any incidents of unlawful eviction within the last 3 years? \_\_\_\_\_
- Have there been any violations of any city, county or state housing code within the last three years? \_\_\_\_\_

Is construction completed on all units?  Yes  No Are any units unsold?  Yes  No

Are there any condo conversions?  Yes  No

Undergoing major structural renovations  Yes  No If "yes" then Prohibited

# **Stories** \_\_\_\_\_ If over 4 stories confirm building is 100% sprinklered, masonry non-combustible (or better) construction, life safety standards are met and an elevator maintenance agreement is in effect.

**Streets or roads:** Controlled by the insured? \_\_\_\_\_ If yes, how many miles? \_\_\_\_\_

**LIFE SAFETY & SECURITY**

\_\_\_\_\_ Confirm Fire Extinguishers are adequately placed and service tags are current.

\_\_\_\_\_ Confirm security guards are not armed and certificates of insurance obtained. (Armed guards are prohibited)

\_\_\_\_\_ Confirm smoke detectors are in each unit. Battery ( ) or Hardwired ( )

**RECREATIONAL FACILITIES**

# \_\_\_\_\_ Baseball diamonds, basketball, racquetball, shuffleboard, tennis or volleyball courts

# \_\_\_\_\_ Beach fronts or lakes. Acres of each lake \_\_\_\_\_

# \_\_\_\_\_ Bicycle trails Miles of each \_\_\_\_\_

# \_\_\_\_\_ Clubhouses – sq footage of clubhouse \_\_\_\_\_ # Convenience Stores \_\_\_\_\_ # Fitness Centers \_\_\_\_\_

# \_\_\_\_\_ Dams (Prohibited)

# \_\_\_\_\_ Docks, # Slips \_\_\_\_\_ # Boat ramps \_\_\_\_\_

# \_\_\_\_\_ Marinas open to the public – (Prohibited)

# \_\_\_\_\_ Playgrounds or parks? Acres of parks \_\_\_\_\_

# \_\_\_\_\_ Saddle animals for hire (prohibited)

# \_\_\_\_\_ Swimming Pools #Saunas \_\_\_\_\_ #Spas \_\_\_\_\_

Confirm pools are fenced with self-latching gates  Yes  No

Confirm rules, hours and depth markers posted  Yes  No

Confirm life safety equipment is available  Yes  No

Confirm no slides or diving boards over 1 meter or 3 feet  Yes  No

Confirm lifeguard is on duty if slide or diving boards present  Yes  No

Describe all losses in the past 3 years: \_\_\_\_\_

Has insurance been canceled or non-renewed in the past year for non compliance of recommendations? \_\_\_\_\_

Has applicant filed Bankruptcy (Chapter 7, 11 or 13) or is applicant in receivership?  Yes  No (prohibited)

**I hereby certify that all information is accurate to the best of my knowledge.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Producer Signature: \_\_\_\_\_ Date: \_\_\_\_\_