



Current Policy Information

IF YES, PLEASE EXPLAIN

- 1. Insured Name
2. Mailing Address
3. Current Carriers/Premium Premium
4. Are the current carriers renewing? Y N
5. Expiration Date
6. Do you require excess D&O liability? Y N
7. Does submitting broker currently provide the insurance for this account? Y N

Habitational Questionnaire

IF YES, PLEASE EXPLAIN

- 1. Inspection contact name Phone:
Insured contact name Phone:
2. Are any locations under renovation? Y N
3. Is security personnel subcontracted armed? Y N
4. Has the applicant received any code violation in the past 3 years that have not been rectified? Y N
5. Are there any Zinsco or Federal Pacific (FPE) Electrical Breakers or Aluminum wiring on any premises? Y N
6. Has the applicant ever filed for bankruptcy protection? Y N
7. Is there a child's playground or nursery on premises? Y N
8. Does applicant have a written evacuation plan? Y N
9. Is there emergency lighting? Y N
10. Owned autos? Y N
11. Smoke alarms in each unit? Y N
12. Manual fire alarms? Y N
13. Is there parking? Y N # of spaces?
14. Is there a pool? Y N
15. Do you furnish to each tenant, signing a vacancy lease, a statement about the property's bedbug infestation history for the Previous year regarding the premises rented by the tenant and the building in which the premises are located? Y N
16. Have you had an infestation of Bedbugs? Y N
17. Who treated this infestation?
18. Number of exits for egress?
19. Is any location: Senior/Student Housing Assisted Living
20. Are there any locations having more than 15% subsidized housing? Y N
21. Are there any docks/marinas? Y N
22. Are all buildings over 9 stories either Fully Sprinklered or one of the following construction types - Fire Resistive or Masonry Non-Combustible? Y N
23. Are there any locations that are to be scheduled, in which coverage is intended to be a only a portion of the exposure? (Examples include Sponsor Owned Units) Y N



