

# Apartment Supplemental Application

*Please answer all questions. Submit this questionnaire with a completed ACORD application and prior carrier loss runs.*

Named Insured: \_\_\_\_\_

Location \_\_\_\_\_

Address(es): \_\_\_\_\_

Website Address: \_\_\_\_\_

### GENERAL INFORMATION

1. Number of buildings:
  - a. Year(s) the building(s) was/were built: \_\_\_\_\_
  - b. When were major building components last updated (e.g., electrical, plumbing, roofing)? \_\_\_\_\_
  - c. Number of stories: \_\_\_\_\_
2. Total number of units: \_\_\_\_\_ Number of units per building: \_\_\_\_\_ Average monthly rent: \$ \_\_\_\_\_
3. What leasing terms do you offer? (Check all that apply.)  Daily  Weekly  Monthly  Annual
4. Has a building been converted to apartments from another occupancy? If yes:  Yes  No
  - a. Describe prior use and the date the conversion was completed: \_\_\_\_\_
5. Are you in the process of converting to condominiums or co-ops?  Yes  No
6. Are the apartments owned under a cooperative?  Yes  No
7. Have you had a backup of sewage in the past 12 months?  Yes  No
8. Are there any outstanding building code violations?  Yes  No
9. Are renters required to carry renters insurance with personal liability coverage?  Yes  No
10. Do you use the services of a third-party property manager? If yes:  Yes  No
  - a. Does the real estate property management company require that they be listed as a named insured on your policy?  Yes  No

### USE AND OCCUPANCY

1. Is any part of the building used as or occupied by:
  - a. A fraternity or sorority house?  Yes  No
  - b. An assisted living or similar facility?  Yes  No
  - c. A nursing or convalescent home?  Yes  No
  - d. A halfway house?  Yes  No
  - e. A boarding house or rooming house?  Yes  No
  - f. Single room occupancy (SRO)  Yes  No
2. How many units are:
 

Vacant? _____	Subsidized or Income-restricted? _____	Graduate Student Housing? _____
Undergraduate Student Housing? _____	Senior housing? _____	
3. What is the square footage of commercial space leased to others?\*  N/A Sq. ft.

### SAFEGUARDS AND SECURITY

1. Do you allow the use of grills or other cooking appliances on balconies?  Yes  No
2. Are renters permitted to use wood-burning, corn-burning or pellet-burning stoves?  Yes  No
3. Are pets allowed? If yes:  Yes  No
  - a. Do you have a written pet policy?  Yes  No

- b. Does the policy prohibit aggressive or dangerous dog breeds?  Yes  No
- c. Does the policy require all dogs to be leashed while on common grounds other than fenced, designated off-leash areas?  Yes  No
4. What fire safeguards do your buildings have?  
 Smoke detectors (all units and common areas)  Central station fire alarm  100% Sprinklered  
 Other:
5. Are all individual units equipped with operational smoke detectors? If yes:  Yes  No  
 Hardwired  Battery
6. If a building has gas utilities, are all units equipped with carbon monoxide detectors? If yes:  Yes  No  
 Hardwired  Battery
7. If a building has window bars, are all bars equipped with a functioning, quick-release latch?  Yes  No
8. Do all buildings and parking areas have outdoor lighting?  Yes  No
9. Are buildings equipped with:  
a. Aluminum wiring  Yes  No  
b. Knob and tube wiring?  Yes  No  
c. Removable electrical fuses?  Yes  No  
d. Federated Pacific brand circuit breakers?  Yes  No
10. Do you offer valet parking?  Yes  No
11. What type of premises security do you have?  
 None  Neighborhood Watch Group  Employed Security Guards  
 Contracted Security Guards  Alarm monitoring  Other:  
a. If any security guards, are they armed? If yes, describe:  Yes  No  
b. If contracted security guards, do you collect certificates of insurance evidencing that such guards carry professional liability insurance?  Yes  No

#### AMENITIES AND ADDITIONAL EXPOSURES

1. Do you have athletic fields or courts?  Yes  No  
a. If yes, how many?
2. Do you have boat docks or slips?  Yes  No  
a. If yes, what are the gross sales?
3. Do you have coin-operated laundry machines?  Yes  No  
a. If yes, what are the gross sales?
4. Do you have community recreational facilities?  Yes  No  
a. If yes, what is the total square footage?  
b. If yes, are these facilities open to non-residents for a fee?  Yes  No
5. Do you have dams, levees or dikes?  Yes  No  
a. If yes, describe. (e.g., Class I Dam, height)
6. Do you have ponds, lakes, reservoirs or other bodies of water?  Yes  No  
a. If yes, how many and what acreage for each?
7. Do you have parks or playgrounds?  Yes  No  
a. If yes, how many?
8. Do you have private indoor parking?  Yes  No  
a. If yes, what is the total square footage?
9. Do you have private storage or storage buildings for tenants?  Yes  No  
a. If yes, what is the total square footage?
10. Do you have stables, horse riding trails or riding arenas?  Yes  No  
a. If yes, what payroll applies to operate and maintain them?
11. Is there a swimming pool or beach exposure?  Yes  No

12. Do you operate a restaurant, bar or tavern?\*

Yes  No

13. Do you hold any special events?\*

Yes  No

a. If yes, are any events open to the general public?

Yes  No

**\*This exposure requires the completion of an additional supplemental application.**

## IMPORTANT NOTICE

I DECLARE THAT THE STATEMENTS MADE IN THIS SUPPLEMENTAL APPLICATION ARE COMPLETE AND TRUE TO THE BEST OF MY KNOWLEDGE AFTER REASONABLE INQUIRY AND ARE MADE PART OF ALL APPLICABLE APPLICATIONS FOR INSURANCE.

Any person who knowingly and with intent to defraud any insurance company or another person submits an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information containing any material fact thereto, commits a fraudulent act that is subject to criminal and substantial civil penalties. **I agree that any intentional concealment or misrepresentation of a material fact concerning this insurance or the subject thereof may void any policy issued. I HAVE READ AND UNDERSTAND THE FRAUD WARNINGS CONTAINED IN ALL APPLICATIONS.**

(As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.)

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Applicant Signature

Title

Date

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Producer Signature

Date