

Habitation Supplemental Application

Named Insured:					
Dba:					
Location Address:					
(Need for each separate location)					
# of Buildings:		# of units per building:			
Construction:		Original Year Built:			
# of stories:		Vacancy Rate (%):			
If over 15 years old, when were the following updated:					
Roof Update Year:		HVAC Update Year:			
Roof Type:		Plumbing Update Year:			
		Electrical Update Year:			
	-		Yes	No	
Is this an HOA? Circle wh	nat applies: Townhome,	Condo, Timeshare?			
Are any units unsold? How	v many?				
How many units are owner	r occupied vs rented?				
Does owner/manager live	on premises?				
Smoke detectors? In all un	its? Battery	Hardwired			
If battery detectors, do	you have a maintenanc	e procedure?			
Local fire annunciator panel or central station fire alarm?					
Are there fire extinguishers on premises					
Tagged & Serviced annually:					
Sprinklered?					
If yes, does the sprinkler system contain earthquake bracing?					
Is there a pool and/or jacuzzi?					
If so, how many? Pool Jacuzzi					
If pool, is there a diving board?					
Are depth markers clearly visible?					
Is pool and/or jacuzzi fenced with a self-latching gate?					
Playground?					
Additional recreational facilities? Type: how many?					
Laundry room?					
Is Laundry facility equipment leased? If yes, provide certificates of insurance.					
Aluminum wiring?					
If risk has aluminum wiring or aluminum pigtail wiring, it is not eligible for our					
program					
Circuit breakers?					
If no and on fuses, the risk is only eligible for our non-admitted program					
Copper plumbing through	out?				



HVAC under maintenance contract? Image: space spac		Yes	No
If yes, this risk is not eligible for our program Any wood shake siding? Is the Property occupied on a seasonal basis? Any marinas, marina operations or boat slips? Any ponds, lakes, streams or other body of water on premises? Is it fenced? Any parking? Type: Sq. ft. Sprinklered? Any assisted living? If yes, this risk is not eligible for our program Any satisted living? If so, what percentage? Any student housing? If so, what percentage? Any HUD, section 8 or financially assisted or subsidized rentals? Type? If so, what percentage? If any of the following: student housing, HUD, section 8, financially assisted or subsidized rentals? If yes, do they have a dry ansul system over the entire cooking area and is it on a service contract (minimum of qu	HVAC under maintenance contract?		
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It so, are they equipped with emergency breakaway release mechanisms?	If so, are they equipped with emergency breakaway release mechanisms?		
Bars on doors?			
If there are railings, what is the spacing between the rails (enter # of inches)?	If there are railings, what is the spacing between the rails (enter # of inches)?		•



FRAUD STATEMENT

Applicable in Arkansas, Louisiana, and West Virginia

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Applicable in Colorado

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable for insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in District of Columbia

WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Applicable in Florida

Any person who knowingly and with intent to injure, defraud, or deceive any insurance company files a statement of claim containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Applicable in Hawaii

For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefit is a crime punishable by fines or imprisonment, or both.

Applicable in Kentucky

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

Applicable in Maine

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines, or a denial of insurance benefits.

Applicable in Maryland

Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Applicable in New Jersey

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in New Mexico

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject tocivil fines and criminal penalties.

Applicable in New York

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Applicable in Ohio

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Applicable in Oklahoma

WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Applicable in Pennsylvania

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Applicable in Rhode Island

The insurance application form shall indicate the existence of a criminal penalty for failure to disclose a conviction of arson.

Applicable in Tennessee, Virginia, and Washington

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.



SIGNATURES

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

Applicant's Name and Title: _____

Applicant's Signature:

Date: _____

Producer's Signature:_____

Date: _____