

DWELLING SUPPLEMENTAL APPLICATION

(You may complete one supplemental application for all locations. Locations should be identified on ACORD Application)

1. Named Insured: \_\_\_\_\_
2. How many total units are there? \_\_\_\_\_  
For the below questions, if there are none, please enter "0".
  - a. How many are subsidized housing? \_\_\_\_\_  
(i.e. low income, section 8/Hope VI, rent subsidies, tax credits, etc.)
  - b. How many are student housing? \_\_\_\_\_
  - c. How many are elderly housing or assisted living? \_\_\_\_\_
  - d. How many are vacant? If any, complete Vacant Building Supplemental Application \_\_\_\_\_
3. What is the average monthly rent?    1BR \$ \_\_\_\_\_    2BR \$ \_\_\_\_\_    3BR \$ \_\_\_\_\_  
Are any properties rented by the day or by the week?     Yes     No
4. Does any building have aluminum wiring, knob and tube wiring or fuses?     Yes     No
5. Have you had any building code violations in the past 5 years?     Yes     No  
If yes, please describe and advise current status: \_\_\_\_\_
6. Are heat and smoke detectors in all the units?     Yes     No  
Are they battery operated or hard-wired? \_\_\_\_\_
7. Are fire extinguishers on the premises?     Yes     No
8. Is there a pool? If yes, please complete the Swimming Pool Supplemental Application.     Yes     No
9. Is there any playground equipment or other recreational devices?     Yes     No  
Describe the equipment/devices: \_\_\_\_\_  
Is the equipment fenced?     Yes     No  
Are rules for use clearly posted?     Yes     No  
How often is maintenance performed? \_\_\_\_\_
10. Are any of the properties mobile homes?     Yes     No  
If yes, how many? \_\_\_\_\_
11. Is the named insured involved in Residential Homebuilding or General Contracting operations?     Yes     No
12. Are any properties in foreclosure, receivership, bankruptcy or owned by a bank or have been within the past 5 years?     Yes     No  
If yes, please describe: \_\_\_\_\_
13. Do you allow pets?     Yes     No  
If yes, please describe pet policy: \_\_\_\_\_

Signature of applicant: \_\_\_\_\_

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