



# HABITATIONAL SUPPLEMENTAL QUESTIONNAIRE

(Complete one copy for each location, in addition to Acord application)

Applicant Name:

Property Name:

Location Address:

Contact Person:

Telephone #:

- Occupancy Type** (Check all that apply)      How Long has Applicant: Owned:      years      Managed:      years

Apartment Building	Time Share/Airbnb	Garden Apartments	Condominium
1-2 Family Dwelling	3-4 Family Dwelling	Boarding/Rooming House	Townhouse
- Is the applicant a real estate or property management company?**      Yes      No

Name of Management Company:      Applicant named as Additional Insured?      Yes      No
- Construction:**      Building Value:      Construction Type:      Frame      Masonry      Other:

Year Built:      # of Stories:      Total # of Buildings:      Total # of Units:

Total Square Feet:      Outside Balcony?      Yes      No      If Yes, is balcony cooking allowed?      Yes      No

Roof:      Composition      Tile      Built-Up      Other:

Parking: Total Area      sq ft      Garage      Covered Parking      Uncovered Parking

Type of Wiring:      Copper      Aluminium      Aluminium Pigtailed      COPALUM Method; or      AlumiCon Connectors

"Federal Pacific Electric" (FPE) Circuit Breaker Boxes:      Yes      No

**Updates:**      Roof:      Year:      Type:      Plumbing:      Year:      Type:

   HVAC:      Year:      Type:      Electric:      Year:      Type:

   Other:      Year:      Type:

Other major renovation completed or anticipated:

**Identify Responsible Party for the Following:**

Name of Outside Contractor:

- |                                |              |                     |
|--------------------------------|--------------|---------------------|
| Janitorial:                    | Employee; or | Outside Contractor: |
| Lawn Care:                     | Employee; or | Outside Contractor  |
| Pool Maintenance:              | Employee; or | Outside Contractor: |
| Snow Removal:                  | Employee; or | Outside Contractor: |
| Upkeep of Sidewalks/Driveways: | Employee; or | Outside Contractor: |

- Occupancy: High Income:      %      Middle Class:      Low Income:      %      Senior Living:      %

Assisted Living:      Yes      No - If Yes, describe:

Student Housing:      Yes      No - If Yes, Undergraduate:      %      Graduate:      %

HUD:      Number of Units:      Other Subsidized:      (fully describe):

Average Monthly Rent per Unit:      Occupancy Rate:      %      Manager on Premises:      Yes      No
- Fire Protection:**      Sprinklered:      Fully      All Units      Common Areas Only      Other:

Smoke Detectors:      Each Unit      Central Station      Hard Wired; or      Battery      How Often Checked:

Fire Extinguishers:      Each Unit      Common Areas      How Often Checked:

Emergency Lighting:      None      Halls      Stairs      Both      Distance to Nearest Fire Station:

Illuminated Emergency Exits:      Yes      No      Fire Alarms:      None      Manual      Automatic

**6. Buildings Over 8 stories:** Self Closers - Units: Yes No Fire Doors: Yes No  
 Standpipes: Yes No Self Closers - Hallways: Yes No Open Stairwells: Yes No  
 Central Station Hook-Up: Yes No Enclosed Stairwells: Number Annunciator Panel: Yes No

**7. Recreational Facilities:**

Pools (#): Indoor Outdoor Lifeguard: Yes No Diving Board: Yes No  
 Slide: Yes No Rescue Equip: Yes No ADA permanent chair lift: Yes No  
 Handrails: Yes No Rules Posted: Yes No Depth Posted: Yes No  
 Gate Locked: Yes No Gate self-closing: Yes No Fenced: Yes No  
 Virginia-Graham Act compliant (anti-vortex drains) Yes No  
 Exercise Room: Yes No Key Pad access Yes No # Jacuzzis: #Saunas:  
 Playgrounds: None Dirt Sand Clay Grass  
 Playground Equipment - Describe:  
 Lake: Yes No Lifeguard: Yes No Beach: Yes No Lifeguard: Yes No  
 Other Recreational Facilities:

**8. Security:**

Dead Bolts on All Entry Doors: Yes No Peep Holes on All Entry Doors: Yes No  
 Buildings Secured: Yes No Front Door Buzzer Entry: Yes No  
 Sliding Door Pin or Security Bar: Yes No Lobby Camera: Yes No  
 Doorman: Yes No - If Yes, 24 Hours Yes No  
 Gate Attendant: Yes No - If Yes, 24 Hours Yes No  
 Security Guard Employee: Yes No- If Yes, Armed Unarmed  
 Security Guard Contracted: Yes No- If Yes, Armed Unarmed  
 Is There a Key Policy: Yes No - If No, Explain:

The undersigned Applicant warrants that the above statements and particulars together with any attached or appended documents are true and complete and do not misrepresent, misstate or omit any material facts.

The applicant agrees to notify us of any material changes in the answers to the questions on this questionnaire which may arise prior to the effective date of any policy issued pursuant to this questionnaire and the Applicant understands that any outstanding quotations may be modified or withdrawn based upon such changes at our sole discretion.

Notwithstanding any of the foregoing, the Applicant understands that we are not obligated or under any duty to issue a policy of insurance based upon this information. The Applicant further understands that, if a policy of insurance is issued, this questionnaire will be incorporated into and form a part of such policy.

Signature of Applicant:

Date:

Title (Owner, Officer, Partner):

**SIGNING THIS QUESTIONNAIRE DOES NOT BIND THE APPLICANT OR THE INSURER OR THE UNDERWRITING MANAGER TO PROVIDE THE INSURANCE.**