

## Supplemental Application – Apartments & Condominiums

<b>Applicant Name:</b> _____	<b>Date:</b> _____
<b>Location Address:</b> _____	
<b>Web Site:</b> _____	

**Business Information:**

Years experience of mgmt. at this location: \_\_\_\_\_ Total years experience in this industry: \_\_\_\_\_  
 Any prior bankruptcies or liquidations?  Yes  No Describe: \_\_\_\_\_

**Premises Information:**

Number of buildings at this location: \_\_\_\_\_ Minimum distance between buildings: \_\_\_\_\_  
 Number of stories: \_\_\_\_\_  
 When were updates for:   - Electricity: \_\_\_\_\_ Partial or complete? \_\_\_\_\_  
                                   - Plumbing: \_\_\_\_\_ Partial or complete? \_\_\_\_\_  
                                   - Roofing: \_\_\_\_\_ Partial or complete? \_\_\_\_\_  
                                   - HVAC: \_\_\_\_\_ Partial or complete? \_\_\_\_\_

What is the occupancy rate? \_\_\_\_\_ Percentage owner occupied: \_\_\_\_\_

Occupancy (percentages):	<u>Elderly</u>	<u>Subsidized</u>	<u>Low Income</u>	<u>Students</u>

Are buildings sprinklered?  Yes  No Percentage: \_\_\_\_\_  
 Resident Manager at this location?  Yes  No  
 Any short-term rentals?  Yes  No Describe: \_\_\_\_\_  
 Are there smoke detectors?  Yes  No Hard wired or battery operated? \_\_\_\_\_  
 Are there fire alarms?  Yes  No Central station, local or pull alarms? \_\_\_\_\_  
 Is there aluminum wiring on premises?  Yes  No Describe: \_\_\_\_\_  
     Is the aluminum wiring repaired?  Yes  No Describe: \_\_\_\_\_

- Clearly marked fire exits?  Yes  No
- Emergency lighting in common areas?  Yes  No
- Fireplaces in units?  Yes  No
- Dead bolt locks on doors to units?  Yes  No
- Are there elevators?  Yes  No
- Is there a parking lot located on premises?  
 Is the parking lot owned, operated & maintained by applicant?  
 What is the size of the parking lot? \_\_\_\_\_
- Secondary means of egress on each floor?  Yes  No
- Are the locks re-keyed after occupancy?  Yes  No
- Do you have an agreement with elevator company?  
 Yes  No  
 Yes  No

**Pools:**  Check here if no Pools

- How many swimming pools? \_\_\_\_\_
- Are there any hot tubs?  Yes  No
- Do pools have self-latching doors or gates?  Yes  No
- Are there any diving boards or slides?  Yes  No
- Are there life guards on duty?  Yes  No
- Is there rescue equipment such as a ring buoy, shepherds hook or pole?  Yes  No
- Are pool depths adequately marked?  Yes  No
- Are pool chemicals properly stored?  Yes  No
- Is there an automatic shut-off?  Yes  No
- Describe: \_\_\_\_\_  
 How often? \_\_\_\_\_

**Recreational Facilities:**  Check here if no Recreational Facilities

- Is there a playground?  Yes  No
- Are there any lakes, ponds or boat slips?  Yes  No Describe: \_\_\_\_\_
- Are there any exercise facilities?  Yes  No Describe: \_\_\_\_\_
- Are there any daycare services?  Yes  No Describe: \_\_\_\_\_
- Are there any tennis, basketball or racquetball courts?  Yes  No Describe: \_\_\_\_\_
- Are there any saunas?  Yes  No Describe: \_\_\_\_\_
- Are there any recreational equipment rentals/checkouts?  Yes  No Describe: \_\_\_\_\_

**Security:**

Are there any employee security guards?  Yes  No Are they armed? \_\_\_\_\_

Are there any third-party security guards?  Yes  No Are they armed? \_\_\_\_\_

Are there any off-duty uniformed policemen?  Yes  No Are they armed? \_\_\_\_\_

Are there any weapons on premises?  Yes  No Describe: \_\_\_\_\_

**Representation & Warranty Statement:**

I have read this Application and I represent that all of the foregoing statements are true and accurate and that these statements are offered as the basis upon which Apex is considering issuance of an insurance policy. Any missing or erroneous information in this Application may jeopardize coverage in the event of a claim under any policy issued by Apex.

**WARNING:** 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.

**Applicant:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_