

HABITATIONAL UMBRELLA SUPPLEMENTAL APPLICATION

1. Name of Insured: _____

2. Address _____
(P.O. Box not acceptable, _____
must have street address _____
in order to quote) _____

3. Total number of employees : _____

4. Sales Amount: _____
(ie, dues, rentals)

5. Year Established: _____ 6. Requested Eff. Date: _____

7. Umbrella Limit: _____
(Max \$10,000,000)

8. The insureds annual income information:

Projected Year _____
Current Year _____
Prior Year _____
Prior Year _____

9. Any individual losses in excess of \$100,000 in the past five years for any of the coverage being provided? If yes, please provide detailed information. YES or NO

10. For General Liability or products coverage, any aggregate losses in excess of \$100,000 in any policy year for the past five years? YES or NO

11. Description of Insureds operations: _____

12. Are there regularly maintained smoke detectors in each unit? YES or NO

13. Does the insured operate their business and occupy space in more than 10 separate locations? YES or NO

14. Are security guards provided at any of the insured's locations? YES or NO
If yes, is the security armed or unarmed? _____

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- 15. Do any of the insured's properties have a pool? YES or NO
If yes, a) are there self-latching gates? YES or NO
b) Number of diving boards? _____

- 16. Does the insured provide any of the following: (Please provide percentage occupancy)
Student housing _____ %
Assisted living _____ %
Medical assisted living _____ %

- 17. Does the insured have any subsidiaries or affiliated entities whose operations differ from the named insured? YES or NO
If yes, please list: _____

- 18. Does the insured now or have they in the past performed any residential construction or any real estate development, including but not limited to condominiums or apartments?
YES or NO

- 19. Does the insured perform or subcontract any maintenance work? YES or NO
If yes, what percentage ? _____

- 20. Is there any marine or marina at any of the insured's locations? YES or NO

Additional comments: _____

****Please also provide Accord Umbrella Application with all underlying information****