

Advanced E&S
Habitational/Lessors Risk Supplemental Application

Insured _____ Date _____

Address _____

Producer _____ Policy Number _____

	Loc. 1	Loc. 2	Loc. 3
1. Address of Location _____			
2. Occupancy: Middle Class _____ Low Income _____ Subsidized _____ Elderly _____ Avg. month rent per unit _____ Occupancy Rate _____			
3. Number of rooms/units _____			
4. Total number of floors _____			
5. Number of floors for Parking/Garage/Lobby? _____			
6. Construction _____			
7. Age _____			
8. Smoke alarms: Central Station? _____ In each room? _____			
9. Standpipes on premises? _____			
10. Manual Fire Alarms: Central Station? _____ In each room? _____			
11. Building sprinklered: Percentage? _____ Central Station? _____			
12. Number of pools? _____ Fenced with self-latching gate? _____ Diving boards? _____ Height above water? _____ Life Guard? _____ Depth adequately marked? _____			
13. Lake on premises? _____			
14. Restaurant or club? _____ What floor? _____			

<p>15. Security Guards employed? _____</p> <p>Are they armed? _____</p> <p>Are there dead bolt locks on all entry doors? _____</p> <p>If there a key policy? _____</p> <p>Explain _____</p> <p>_____</p> <p>_____</p>			
<p>16. Is insured a real estate agent or broker? _____</p> <p>Professional coverage? _____</p>			
<p>17. Date rewired? _____</p> <p>Any aluminum wiring? _____</p>			