

INSURANCE MANAGING UNDERWRITER  
CA lic.# 0300517

**RENTAL DWELLING POLICY  
APPLICATION**

DATE APPLICATION COMPLETED: \_\_\_\_\_

NAMED PERIL  SPECIAL FORM

INCEPTION DATE: \_\_\_\_\_

DIRECT BILL:  YES  NO

POLICY IS:  NEW  RENEWAL OF \_\_\_\_\_  
OR  REWRITE OF \_\_\_\_\_

SEND BILL TO:  INSURED  MORTGAGEE

INSTALLMENTS:  ANNUAL  SEMI-ANNUAL  QUARTERLY

<b>PRODUCER: (NAME AND ADDRESS)</b>	<b>INSURED: (NAME AND ADDRESS)</b>
<b>MORTGAGEE: (NAME AND ADDRESS)</b>	<b>PROPERTY ADDRESS: (IF DIFFERENT)</b>
<b>REPLACEMENT COST:</b> A) DWELLING \$ _____ ATTACHED GARAGE \$ _____ DETACHED GARAGE \$ _____  B) DESCRIBE APPURTENANT STRUCTURES GUEST HOUSE \$ _____ BARN \$ _____ SWIMMING POOL \$ _____ OTHER \$ _____  C) DECLARED PERSONAL PROPERTY \$ _____	<b>OWNERS, LANDLORDS AND TENANTS LIABILITY:</b> COVERAGE REQUESTED: YES NO  \$ 100,000 \$ 300,000 \$ 500,000 \$ 1,000,000  <b>PERSONAL INJURY COVERAGE:</b> YES NO  <b>GREEN BUILDING COVERAGE:</b> YES NO
<b>DEDUCTIBLES:</b> \$ 250      \$ 500      \$ 1,000      \$ _____ (OTHER – PLEASE ENTER AMOUNT)	
<b>OPTIONAL INCREASED BUILDING ORDINANCE COVERAGE:</b> YES NO INCREASED LIMIT FOR COST OF CONSTRUCTION: \$ _____ INCREASED LIMIT FOR DEBRIS REMOVAL: \$ _____	
<b>OPTIONAL EARTHQUAKE COVERAGE:</b> YES NO	
<b>DISTANCE APPROVED HYDRANT:</b> _____	<b>DISTANCE TO RESPONDING FIRE STATION:</b> _____
<b>VALUE COMPUTATION:</b> LIVING AREA: _____ SQ. FT      PORCHES, DECKS, UNFINISHED AREA: _____ SQ. FT BASEMENT: _____ SQ. FT      ATTACHED GARAGE: _____ SQ. FT APPURTENANT STRUCTURE: _____ SQ. FT      DETACHED GARAGE: _____ SQ. FT DESCRIBE THE APURTENANT STRUCTURE(S): _____	
<b>BUILDING INFORMATION</b> 1) YEAR BUILT _____      2) AGE OF ROOF _____ AND CONDITION _____  3) ROOF COVER:      COMPOSITION SHINGLE _____%      TAR & GRAVEL _____%      TILE _____% WOOD SHINGLE/SHAKE _____%      METAL _____%      OTHER _____% 4) YEAR THE FOLLOWING WERE BROUGHT UP TO CODE: WIRING _____ HEATING _____ PLUMBING _____ 5) OF TOTAL LIVING AREA WHAT PERCENTAGE IS LOCATED ABOVE THE GARAGE: NONE ____      25% ____      50% ____      75% ____      100% ____ 6) IS BUILDING BOLTED TO FOUNDATION? YES NO 7) IF BASEMENT, AMOUNT OF AREA THAT IS FINISHED: _____% 8) EXTERIOR WALL MATERIAL:      WOOD FRAME _____%      FRAME STUCCO _____% BRICK _____%      OTHER: (DESCRIBE) _____% 9) USE:      SINGLE FAMILY DETACHED      2-FAMILY DUPLEX      3-FAMILY TRIPLEX      4-FAMILY FOUR-PLEX 10) DWELLING FURNISHED? YES NO      IF YES, # OF UNITS OR ALL UNITS 11) NUMBER OF STORIES: _____ (PLEASE INDICATE IF THERE ARE HALF STORIES) 12) PROTECTIVE SYSTEMS: NONE      LOCAL ALARM: BURGLARY FIRE CARBON MONOXIDE CENTRAL STATION FIRE ALARM      INTERIOR BUILDING MONITORED SPRINKLER SYSTEM	

**ADDITIONAL UNDERWRITING INFORMATION**

OUR ACCEPTANCE OF THIS RISK WILL DEPEND ON THE COMPLETENESS AND ACCURACY OF THE FOLLOWING ANSWERS.

1. PREVIOUS CARRIER \_\_\_\_\_ POLICY No. \_\_\_\_\_

2. HAS ANY CARRIER CANCELLED, REQUESTED REPLACEMENT OR REFUSED RENEWAL? YES NO  
IF YES, EXPLAIN: \_\_\_\_\_

3. LIST CLAIMS OR LOSSES FOR LAST 3 YEARS AND, IF ANY, PRIOR TO THAT: \_\_\_\_\_

4. PRODUCER, HOW LONG HAVE YOU KNOWN THE INSURED? \_\_\_\_\_ YEARS

5. PRODUCER, HOW LONG HAVE YOU WRITTEN INSURED'S INSURANCE? \_\_\_\_\_ YEARS

6. IF CORPORATE OWNED, DOES THE CORPORATION CONDUCT OPERATIONS OTHER THAN OWNERSHIP OF RENTAL DWELLINGS?  
IF SO, EXPLAIN \_\_\_\_\_

7. DWELLING PURCHASE PRICE: \$ \_\_\_\_\_ DATE OF PURCHASE: \_\_\_\_\_

8. IF TENANT OCCUPIED:  
a. WHAT IS THE ANNUAL RENTAL INCOME? \$ \_\_\_\_\_  
b. DOES THE INSURED EMPLOY A PROPERTY MANAGEMENT FIRM? YES NO  
c. DOES THE INSURED REQUIRE A SECURITY/DAMAGE DEPOSIT FROM TENANTS? YES \$ \_\_\_\_\_ NO

9. IS DWELLING VACANT OR UNOCCUPIED? YES NO  
IF YES, A) ON WHAT DATE DID THE DWELLING BECOME VACANT: \_\_\_\_\_  
B) IS BUYBACK COVERAGE DESIRED FOR VANDALISM, MALICIOUS MISCHIEF, THEFT, ATTEMPTED  
THEFT IF DWELLING IS VACANT FOR MORE THAN 60 DAYS: YES NO

10. IS DWELLING IN OR NEAR A WOODED AREA? YES NO IF YES, DISTANCE TO AREA: \_\_\_\_\_

11. IS DWELLING IN OR NEAR A DESIGNATED BRUSH AREA? YES NO IF YES, DISTANCE TO BRUSH: \_\_\_\_\_

12. ARE THERE ANY UNUSUAL EXPOSURES WE SHOULD KNOW ABOUT? YES NO  
IF YES, EXPLAIN: \_\_\_\_\_

13. QUALITY GRADE OF CONSTRUCTION? \_\_\_ ECONOMY \_\_\_ STANDARD \_\_\_ ABOVE AVERAGE \_\_\_ CUSTOM \_\_\_ PREMIUM

14. PROPERTY SLOPE? NONE (0-15°) MODERATE (16-30°) STEEP (OVER 30°)

15. IS DWELLING NEAR A BODY OF WATER? YES NO

16. ANY DOCKS OR PIERS ON PREMISES? YES NO

17. DOES DWELLING HAVE A WOOD BURNING HEATING DEVICE? YES NO

18. PHOTOGRAPH OF DWELLING – PLEASE ATTACH

**FRAUD WARNING:**  
**FOR YOUR PROTECTION CALIFORNIA LAW REQUIRES THE FOLLOWING TO APPEAR ON THIS FORM: ANY PERSON WHO KNOWINGLY PRESENTS FALSE OR FRAUDULENT CLAIM FOR THE PAYMENT OF A LOSS IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN STATE PRISON.**  
**ARIZONA, NEVADA, OREGON AND WASHINGTON FRAUD WARNING: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.**

**EACH NAMED INSURED MUST SIGN AND DATE THIS APPLICATION:**

_____ SIGNATURE	_____ DATE	_____ SIGNATURE	_____ DATE
_____ SIGNATURE	_____ DATE	_____ SIGNATURE	_____ DATE