

AGENCY CUSTOMER ID: _____

LOC #: _____



APARTMENT BUILDING SUPPLEMENT
COMPLETE THIS SUPPLEMENT FOR EACH APPLICABLE LOCATION

DATE (MM/DD/YYYY)

AGENCY A Biz Action Insure Me Agency		CARRIER		NAIC CODE
POLICY NUMBER	EFFECTIVE DATE	NAMED INSURED/ APPLICANT		

CRIMINAL INCIDENTS

1. DOES MANAGEMENT ADVISE RESIDENTS AND PROSPECTIVE RESIDENTS OF ALL REPORTED CRIMINAL ACTIVITY THAT HAS TAKEN PLACE ON THE PROPERTIES? (If "YES", explain how this is done)	Y/N
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GENERAL INFORMATION

EXPLAIN ALL YES RESPONSES UNLESS STATED OTHERWISE				Y/N
1. IS APPLICANT A REAL ESTATE OR PROPERTY MANAGEMENT COMPANY? (No explanation needed)				
2. ARE ANY OF THE BUILDINGS RESIDENTIAL RETIREMENT FACILITIES OR ASSISTED LIVING FACILITIES? (No explanation needed)				
3. ARE ANY OF THE BUILDINGS NURSING / CONVALESCENT HOMES? (No explanation needed)				
4. <input checked="" type="checkbox"/> ANY OF THE BUILDINGS HOUSING AUTHORITIES OR DO THEY INCLUDE SUBSIDIZED HOUSING? (If "YES", provide the following):				
	UNITS SUBSIDIZED PER LOCATION	EXPLANATION		
	%			
5. <input checked="" type="checkbox"/> THERE BUILDINGS UNDER CONSTRUCTION OR BEING REMODELED? (If "YES", provide both of the following):				
a. ARE ANY BUILDINGS BEING REMODELED FOR CONVERSION TO CONDOMINIUMS AND/OR TOWNHOUSES? (No explanation needed)				
b. TYPE OF WORK BEING DONE		COST OF RENOVATION	SUBCONTRACTED WORK COST	
		\$	\$	

MAINTENANCE

IDENTIFY RESPONSIBLE PARTY FOR THE FOLLOWING:				OUTSIDE CONTRACTOR NAME	
JANITORIAL		EMPLOYEE	OUTSIDE CONTRACTOR		
LAWN CARE		EMPLOYEE	OUTSIDE CONTRACTOR		
SNOW REMOVAL		EMPLOYEE	OUTSIDE CONTRACTOR		
UPKEEP OF SIDEWALKS AND DRIVEWAYS		EMPLOYEE	OUTSIDE CONTRACTOR		

1. ARE CERTIFICATES ON FILE FOR OUTSIDE CONTRACTORS? (No explanation needed)	Y/N
2. IS APPLICANT NAMED AS AN ADDITIONAL INSURED ON OUTSIDE CONTRACTOR'S POLICY? (No explanation needed)	

RECREATIONAL EXPOSURES

NUMBER OF:					
BASEBALL FIELDS		CLUBHOUSES	Sq. Ft.	RACQUETBALL COURTS	Miles
BASKETBALL COURTS		LAKES/PONDS	Acres	SAUNAS	TENNIS COURTS
BEACHES		PARKS	Acres	SHOOTING RANGES	VOLLEYBALL COURTS
BIKE TRAILS	Miles	PLAYGROUND		SPA / HOT TUBS	
BOAT SLIPS		POOLS (Complete Pool Section)		STABLES	

1. ARE THESE AVAILABLE TO NON-RESIDENTS FOR A FEE? (If "YES", provide the following): ANNUAL RECEIPTS: \$	Y/N
2. ARE THERE ANY SWIMMING POOLS, WADING POOLS, HOT TUBS AND/OR SPAS ON ANY OF THE PROPERTIES? (If "YES", provide the following): a. ARE THE SWIMMING POOLS, WADING POOLS, HOT TUBS AND/OR SPAS IN COMPLIANCE WITH THE FEDERAL VIRGINIA GRAEME BAKER POOL AND SPA SAFETY ACT? (If "NO", explain)	

MASTER KEYS AND LOCKS

1. HOW DOES MANAGEMENT HANDLE THE MONITORING OF MASTER KEYS?				
2. HOW ARE LOCKS HANDLED UPON VACANCY OF RESIDENTS?		RE-KEYED	CHANGED COMPLETELY	

REMARKS (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

AGENCY CUSTOMER ID: _____

LOC #: _____

Information on this page applies to all buildings at this location

NUMBER OF UNITS PER LOCATION: _____

APARTMENT BUILDING INFORMATION - BLDG#:

OCCUPANCY TYPE (Check at least one or all that apply)					
<input type="checkbox"/>	APARTMENT BUILDING	<input type="checkbox"/>	APARTMENT HOTEL/ TIME SHARE	<input type="checkbox"/>	2 FAMILY DWELLING
<input type="checkbox"/>	GARDEN APARTMENTS	<input type="checkbox"/>	1 FAMILY DWELLING	<input type="checkbox"/>	3 FAMILY DWELLING
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	4 FAMILY DWELLING
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	BOARDING/ ROOMING HOUSE
OWNED SINCE (YYYY):		TOTAL NUMBER OF UNITS:		UNIVERSITY/ COLLEGE STUDENTS AS TENANTS: %	
RENT PER UNIT	1 BEDROOM	2 BEDROOM	3 BEDROOM	OTHER TYPE:	
\$	\$	\$	\$	\$	

FIRE PROTECTION - BLDG#:

1.	IS THE BUILDING SPRINKLERED?	NO	ALL UNITS	COMMON AREAS ONLY
2.	ARE THERE FIRE EXTINGUISHERS?	NO	ALL UNITS	COMMON AREAS ONLY
a	FIRE EXTINGUISHERS CHECKED:	ANNUALLY	SEMI-ANNUALLY	
3.	ARE THERE SMOKE DETECTORS IN EACH UNIT?	NO	BATTERY OPERATED	HARD WIRED
a	SMOKE DETECTORS CHECKED:	ANNUALLY	SEMI-ANNUALLY	
# FIRE DIVISIONS:			# UNITS PER FIRE DIVISION:	

SECURITY - BLDG#:

1	SECURITY (Check all that apply):	NONE	<input type="checkbox"/>	SECURITY GATED ACCESS	<input type="checkbox"/>	BUILDING ACCESS		
2	IF APPLICABLE, SECURITY GUARDS ARE (Check all that apply):	ARMED	<input type="checkbox"/>	UNARMED	<input type="checkbox"/>	EMPLOYEES OF MANAGEMENT	INDEPENDENT CONTRACTORS	
3	IF INDEPENDENT CONTRACTORS, ARE CERTIFICATES ON FILE? (No explanation needed)							Y / N
4	IS APPLICANT NAMED AS AN ADDITIONAL INSURED ON INDEPENDENT CONTRACTOR'S POLICY? (No explanation needed)							
5	IS SECURITY 24 HOURS? (No explanation needed)							
6	WHAT ARE THE GUARDS RESPONSIBLE FOR? (Check all that apply):	RESIDENTS' SAFETY		COMPLEX AND AMENITIES				

GATED SECURITY (Answer Questions 7 - 11)

7	IF GATED, IS ENTIRE APARTMENT COMPLEX GATED? (No explanation needed)							Y / N
8	HOW IS ACCESS OBTAINED? (Check all that apply):	CARD	<input type="checkbox"/>	GUARD AT GATE	<input type="checkbox"/>	SECURITY CODE		
9	WHO IS GIVEN ACCESS? (Check all that apply):	<input type="checkbox"/>	RESIDENTS	<input type="checkbox"/>	EMPLOYEES	<input type="checkbox"/>	PROPERTY MANAGE	
		<input type="checkbox"/>	MAINTENANCE STAFF / CONTRACTOR					
10	IS THERE A POLICY IN PLACE FOR CHANGING SECURITY CARDS OR SECURITY CODES? (If "YES", explain)							Y / N
11	IS THERE A PROCEDURE IN PLACE IF THE GATE IS NOT WORKING? (If "YES", describe the procedure)							

BUILDING ACCESS (Answer Questions 12 - 14)

12	IF BUILDING ACCESS IS RESTRICTED, HOW IS ACCESS OBTAINED? (Check all that apply):	<input type="checkbox"/>	CARD KEY	<input type="checkbox"/>	INTERCOM	<input type="checkbox"/>	SECURITY CODE	<input type="checkbox"/>	DOORMAN	<input type="checkbox"/>	SECURITY GUARD	<input type="checkbox"/>	VIDEO
13	WHO IS GIVEN ACCESS? (Check all that apply):	<input type="checkbox"/>	RESIDENTS	<input type="checkbox"/>	EMPLOYEES	<input type="checkbox"/>	PROPERTY MANAGE	<input type="checkbox"/>	MAINTENANCE STAFF / CONTRACTOR				
14	IS THERE A POLICY IN PLACE FOR CHANGING SECURITY CARDS OR SECURITY CODES? (If "YES", explain)							Y / N					

IF SECURITY ALARMS ARE PRESENT (Answer Questions 15 - 17)

15	ARE ALARM SYSTEMS IN EVERY UNIT? (No explanation needed)								
16	ARE THE RESIDENTS SHOWN HOW TO OPERATE THE ALARM SYSTEMS? (No explanation needed)								
17	WHO MONITORS THE ALARMS?								
18	IF RESIDENTS' DOORS OR WINDOWS CONTAIN ANY OF THE FOLLOWING (Check all that apply):	<input type="checkbox"/>	VIEW WINDOW / PEEPHOLE	<input type="checkbox"/>	BARS ON WINDOWS	<input type="checkbox"/>	LOCK PINS FOR WINDOWS / SLIDING GLASS DOORS	<input type="checkbox"/>	DEAD BOLTS