



PART I. ADDITIONAL AVAILABLE COVERAGES

☐ Personal Articles Floater ☐ Primary Flood ☐ Excess Flood ☐ Excess Umbrella

PART II. APPLICATION INFORMATION

- ## PART III. SUBMITTING AGENT

- ## PART IV. PRIOR INSURANCE & REQUEST FOR NON-ADMITTED

- ## PART V. PRIOR CLAIMS

F-Ex-085-Hmown-Cndo-App 1124

HOMEOWNERS/CONDO APPLICATION

PART VI. RISK INFORMATION

1. Risk Address: _____

2. Mailing Address (if different): _____

3. Occupancy:
- ☐ Primary ☐ Secondary ☐ Seasonal ☐ Tenanted ☐ Vacant
- ☐ Course of Construction or Renovation ☐ Short Term Rental
4. Residence Type: ☐ Single Family Dwelling ☐ Multi-Family Dwelling
- ☐ Condo/Coop
5. Number of Families (if multi): _____
6. Construction Type: ☐ Frame ☐ Jointed Masonry ☐ Brick Veneer
- ☐ EIFS ☐ Log ☐ Superior/MNC
7. Roof Shape: ☐ Gable ☐ Hip ☐ Flat ☐ Built Up ☐ Other
8. Roof Covering: ☐ Shingle ☐ Tile ☐ Concrete ☐ Wood Shake ☐ Other
9. Year Built: _____
10. Square Footage: _____
11. Year Home Systems were Updated:
- | | Partial | Complete |
|--------------------------------------|---------|----------|
| <input type="checkbox"/> Plumbing: | _____ | _____ |
| <input type="checkbox"/> Electrical: | _____ | _____ |
| <input type="checkbox"/> Heating: | _____ | _____ |
| <input type="checkbox"/> Roof: | _____ | _____ |
12. Protection Class: _____

PART VII. PROTECTIVE DEVICES

1. Central Station Fire Alarm ☐ Yes ☐ No
2. Central Station Burglar Alarm ☐ Yes ☐ No
3. Water leak detection or flow alarm with an Automatic Shutoff System. ☐ Yes ☐ No
4. Interior Sprinkler system covering at least 50% of the interior Dwelling. ☐ Yes ☐ No
5. Opening Protections - Hurricane Impact Glass for: ☐ All Openings ☐ Some > 50% ☐ None ☐ Other/Unknown
6. Roof Anchor: ☐ Clips ☐ Single Wraps ☐ Double Wraps ☐ Structural ☐ None ☐ Other/Unknown

HOMEOWNERS/CONDO APPLICATION

PART VIII. COVERAGES

1. Covered Perils: ☐ All Risk (ex- Flood & EQ) ☐ Wind Only
2. Dwelling / A&A Limit: _____
3. Other Structures Limit: _____
4. Special Personal Property Coverage: ☐ Yes ☐ No
5. Personal Property Limit: _____
6. Loss of Use Limit: _____
7. Personal Liability Limit: ☐ \$0 ☐ \$300,000 ☐ \$500,000 ☐ \$1,000,000
8. All Other Peril Deductible: ☐ \$2,500 ☐ \$5,000 ☐ \$10,000 ☐ \$25,000 ☐ \$50,000
9. Wind/Hail Deductible: ☐ 1% ☐ 2% ☐ 3% ☐ 5% ☐ 10%

PART IX. OPTIONAL COVERAGES

****Please note, the Optional Coverage Limits listed below may not be available based on the specific details of the account.***

1. Personal Injury: ☐ Yes
2. ID Fraud: ☐ \$5,000 ☐ \$15,000 ☐ \$25,000
3. Water Backup Limit: ☐ \$10,000 ☐ \$25,000 ☐ \$50,000 ☐ \$100,000
4. Property Mold Limit: ☐ \$5,000 ☐ \$15,000 ☐ \$25,000 ☐ \$50,000
☐ \$100,000 ☐ \$1,000,000
5. Extended Replacement Cost: ☐ 25% ☐ 50%
6. Increase Ordinance or Law (10% included): ☐ 15% ☐ 25%
7. Business Personal Property: ☐ \$10,000 On/Off Premises ☐ \$25,000
8. Florida Catastrophic Ground Collapse: ☐ Yes ☐ No
9. Mechanical Breakdown: ☐ \$25,000 ☐ \$50,000
10. Service Line: ☐ \$10,000 ☐ \$25,000
11. Pollution: ☐ \$25,000
12. Lock replacement: ☐ \$5,000
13. Supplement Loss Assessment: ☐ \$100,000
14. Recreational Motor Vehicle Liability: ☐ \$50,000
15. Mortgage Replacement Expense: ☐ \$25,000
16. Golf Cart Physical Damage: ☐ \$5,000 ☐ \$10,000 ☐ \$25,000

**Please inquire if you are interested in covering Personal Articles such as jewelry, fine art and other collectables.*

HOMEOWNERS/CONDO APPLICATION

PART X. UNDERWRITING QUESTIONS

1. High Profile Insured / Occupation? ☐ Yes ☐ No
2. Any negative articles, media, press or publicity regarding the insured(s)? ☐ Yes ☐ No
3. Is the Home on the Historic Registry? ☐ Yes ☐ No
- a. Are there Public Tours or Foot Traffic? ☐ Yes ☐ No
4. Is there a Home-Based Business Practice? ☐ Yes ☐ No
- a. Are there employees on Premises? ☐ Yes ☐ No
- b. Is there Public Foot Traffic on Premises? ☐ Yes ☐ No
5. Are there Animals with prior bite history? ☐ Yes ☐ No
6. Is there an Incidental Farming Exposure? ☐ Yes ☐ No
- a. Are there more than 10 Animals including Horses? ☐ Yes ☐ No
7. Is there a Pool on Premises? ☐ Yes ☐ No
- a. Is the Pool or Property Fenced with a locked gate? ☐ Yes ☐ No
- b. Is there a Diving Board, Slide, Diving Rocks? ☐ Yes ☐ No
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8. Is there a Trampoline on Premises? ☐ Yes ☐ No
- a. Is the Trampoline netted? ☐ Yes ☐ No
9. Is there an Underground Fuel Tank? ☐ Yes ☐ No
10. Is there a Solid Fuel Burning Stove? ☐ Yes ☐ No
- a. Is it Professionally Installed & well maintained? ☐ Yes ☐ No
11. Is the Home for Sale? ☐ Yes ☐ No
12. Is this a new purchase? ☐ Yes ☐ No
- a. Was the home a foreclosure or vacant home? ☐ Yes ☐ No
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13. Is there Polybutylene plumbing? ☐ Yes ☐ No
14. Does the Home have less than 100 AMP electrical? ☐ Yes ☐ No
15. Is there any Knob & Tube wiring? ☐ Yes ☐ No
16. Is there a current Lapse in Coverage? ☐ Yes ☐ No
- a. Duration of Lapse: _____
- b. Reason for Lapse: _____

FRAUD STATEMENTS / SIGNATURE

The following is part of the Application:

Applicable in AL

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution fines or confinement in prison, or any combination thereof.

Applicable in AR, LA, MD, RI and WV

Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. *Applies in MD Only.

Applicable in CA

For your protection California law requires the following to appear on this form. Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Applicable in CO

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in DC

WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Applicable in FL

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Applicable in KS

A "fraudulent insurance act" means an act committed by any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written, electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto.

Applicable in KY

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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.

Applicable in ME

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

Applicable in NJ

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in NM

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

Applicable in NY

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.

NEW YORK APPLICANT'S SIGNATURE:	DATE
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Applicable in OH

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Applicable in OK

WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Applicable in OR

Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in PA

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 subjects such person to criminal and civil penalties.

FRAUD STATEMENTS / SIGNATURE

Applicable in PR

Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances be present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

Applicable in TN and VA

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.

Applicable in WA

It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purposes of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

PRODUCER SIGNATURE	PRODUCER'S NAME (Please Print)	STATE PRODUCER LICENSE NO. (Required in FL)
APPLICANT'S SIGNATURE .	DATE	NATIONAL PRODUCER NUMBER