

## SALEM RISK Habitational Supplement

## Required attachments for a bindable quote

- **ACORD Application**
- **Inspection Contact**
- Statement of Values with labeled plot plan

- Currently Valued, 3-year loss runs
- Completed SRA Supplement

Named Insured: Effective Date:

Date Bindable Quote Needed: **Target Premium:** 

New Purchase? Yes Does agency currently control business? No Yes No

Select all use classes applicable to this policy:

**Apartments** Restaurant <25% Office <25% Senior

Cooperative Mercantile <25% Student\*

Rental Condo Units Dwellings\* Describe Mercantile:

>> What percentage of units are alloted for subsidized/section 8 housing?

\*If student dwellings, provide # of bedrooms on statement of values

**Total Number of Units** 

#Evict last 12 months # Under construction # Occupied # Vacant

**Prequalification-** If any of the following exposures exist, this risk does not qualify.

## Check here to confirm that none of the following exist:

- 1. Locations undergoing major construction
- 2. Armed guards, without contracts in place for any type of courtesy office/off-duty police officer
- 3. Buildings where major systems haven't been updated within the past 30 years
- 4. Electric with any of the following: <100 amps to each unit, knob and tube, fuses, circuit breaker panels manufactured by Zinsco or Federal Pacific with stab-lock, unremediated aluminum wiring
- Plumbing with either of the following: galvanized or polybutylene piping

Dog recreation area Rating- Check all that apply Number of Inground pools Stove top fire stops

Smoke free property Central station fire alarms in common areas

Hard wired smoke detectors in units and Designated smoke free area

common areas

Full system 13R sprinkler system Gut rehab Year Full system 13 commercial grade Vacant land Acres

sprinkler system

Have there been any losses in the past three years?

Unknown

## **GENERAL**

GENERAL		
1. Any policy or coverage declined, canceled or non-renewed during the prior 3 years?	Yes	No
<ol> <li>During the last 5 years has any Named Insured, officer, director, stockholder or any partner or member been indicted for or convicted of any degree of the of fraud bribery, arson or any other arson related crime in connection with this or any property? If yes, risk is not eligible due to crime</li> </ol>	Yes	No
3. List any Additional Insureds being added to the policy		
PROPERTY MANAGEMENT AND PROTECTION		
1. Who performs the day to day property management?		
Who performs snow removal?     a) If work is conducted by an independent contractor, are there contracts with hold harmless and indemnification agreements?	Yes	No
3. Are tenants required to name landlord as additional insured?	Yes	No
PROPERTY EXPOSURES		
1. Are charcoal grills allowed at any location?	Yes	No
2. Are gas grills required to be at least 10' away from any combustible building?	Yes	No
3. Are any renovations planned? If yes describe in comment section on last page	Yes	No
LIABILITY EXPOSURES		
<ol> <li>Does every building have two means of egress, such as second interior stairwell, exterior stairs to grade, fire escape or grade or fire balconies?</li> <li>a. Describe:</li> </ol>	Yes	No
Does any Named Insured own another business?     a. Name of business	Yes	No
3. Are there any ponds or bodies of water in which public access is allowed?	Yes	No
4. Are there any ponds or bodies of water that do not have posted warnings?	Yes	No
COMMERCIAL OCCUPANTS		
1. Are there any commercial occupancies- if yes please describe	Yes	No
2. Is there a cooking exposure on the premises?	Yes	No
a. Are there any deep fat fryers?	Yes	No
b. Is there a hood and duct extinguishing system that meets UL 300 requirements?	Yes	No
c. Is there are cleaning contract in force with an independent contractor?	Yes	No
<ul> <li>d. Does the owner/operator provide a hold harmless and indemnification agreements?</li> <li>Copy of contract required</li> </ul>	Yes	No

