



West Coast Habitational Apartment and Condo Association Supplemental Questionnaire

Named Insured:			
Location Address:			
Roof Update Year		HVAC Update Year	
Roof Type		Plumbing Update Year	
Elec. Update Year		Is this property on the historical registry?	

* An additional charge/credit will be made for any discrepancy in Square footage or # of units discovered as the result of our site inspection.

	Yes	No
Smoke detectors? Battery Hardwired		
If battery detectors, do you have a maintenance procedure?		
Local fire annunciator panel or central station fire alarm?		
Is there a pool?		
If so, how many?		
If pool, is there a diving board?		
Are depth markers clearly visible?		
Is pool and/or Jacuzzi fenced with a self-latching / Self- locking gate?		
Is the pool in compliance with the Virginia Graeme Baker Act?		
Laundry room?		
Is Laundry facility equipment leased?		
Is there asbestos present in any building?		
Copper plumbing throughout?		
Aluminum wiring?		
<i>If risk has aluminum wiring or aluminum pigtail wiring, it is not eligible for our program</i>		
Circuit breakers? **knob and tube wiring is not eligible for the program		
<i>Any Federal Pacific, Stab-Lok or Zinsco panels?</i>		
If on fuses are they glass?		
If yes, it is not eligible for our program		
HVAC under maintenance contract?		
Any wood shake roofing or mansards?		
<i>If yes, this risk is not eligible for our program</i>		
Any wood shake siding?		
If yes, what % of the property is wood-shake siding?		



	Yes	No
Is the Property occupied on a seasonal basis?		
If yes, how many months occupancy per year?		
Are there any short-term rentals (daily, weekly, monthly – i.e. AirBnB or similar)?		
Current occupancy rate of this location (enter percentage)?		
For condo associations please provide the percentage of rented versus owned:		
Any marinas, marina operations or boat slips?		
Any ponds, lakes, streams or other body of water on premises? Is it fenced?		
Is the property required to carry flood insurance?		
Any subterranean parking?		
If so, please provide the square footage of the parking area:		
Service contract for fire protection equipment on the property?		
Any assisted living?		
<i>If yes, this risk is not eligible for our program</i>		
Any senior housing?		
If so, what percentage?		
Any student housing?		
If so, what percentage?		
Are there contracts with the school, roommate matching, or reduced rent for students?		
Apartments only – does this location allow accommodations and modifications to be in compliance with ADA regulations?		
Any commercial or retail exposure? If so please provide the square footage and list the tenants:		
Any commercial cooking and/or community eating areas?		
If yes, do they have a dry ansul system over the entire cooking area and is it on a service contract (minimum of quarterly)?		
Is there a manual shut off installed?		
How often are the hoods and duct cleaned?		
How often are the grease filters cleaned?		
Do they have a deep fat fryer?		
If yes, does it have a high temperature switch?		
Any childcare operations?		
Any Armed security services or security hired directly by the insured?		



	Yes	No
Any onsite medical staff and/or nurse or nurse aide?		
Any onsite storage of chemicals or hazardous materials?		
Fire extinguishers?		
Fully sprinklered?		
If yes, does the sprinkler system contain earthquake bracing?		
Bars on windows? If so, what rooms?		
If so, are they equipped with emergency breakaway release mechanisms?		
Bars on doors?		
If there are railings, what is the spacing between the rails (enter # of inches)?		
Does property meet all local zoning codes?		
Gas lines on the property?		
If so, does the location have automatic seismic gas shut off valves?		
Are BBQ grills or any other cooking permitted on balconies/patios?		
Is emergency lighting installed in all stairways and exits?		
Any construction planned during the upcoming policy period?		
Are water heaters double strapped?		
Have you had any violations or inquiries opened with the city, county or state in regards to complaints from tenants?		
Have you ever had a habitability claim?		
Does the Named Insured have any non-real estate operations? (i.e. construction or maintenance/service operations). If yes, please explain:		
Does the Named Insured use a standard contract for all vendors/service contractors involved in the ongoing maintenance of the property?		
Does the Named Insured receive the following from vendors/contractors:		
1. Additional Insured status on a primary/non-contributory basis?		
2. Evidence of liability limits equal to or greater than their own?		
3. Proof of Workers Compensation insurance?		



Any person who knowingly and with intent to defraud any insurance company or another 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 the person to criminal and civil penalties.

APPLICABLE IN ARIZONA - ARIZONA FRAUD STATEMENT

For your protection, Arizona law requires the following statement to appear on this form. Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.

APPLICABLE IN CALIFORNIA - CALIFORNIA FRAUD STATEMENT

For your protection, California law requires that you be made aware of the following: Any person who knowingly presents a false or fraudulent claim for payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

APPLICABLE IN OREGON – OREGON FRAUD STATEMENT

Any person who knowingly and with intent to defraud any insurance company or another 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 may be a crime.

APPLICABLE IN WASHINGTON – WASHINGTON FRAUD STATEMENT

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.

APPLICABLE IN NEVADA – NEVADA FRAUD STATEMENT

Presenting any statement to an insurer while knowing that the statement conceals or omits facts, or contains false or misleading information about any fact material to an application for the issuance of an insurance policy.

Signature
(Owner/Insured/Applicant):

Date: _____