

APARTMENT SUPPLEMENTAL APPLICATION

(Include Acord application)

Applicant's Name: _____ Location Address: _____
Mailing Address: _____

APARTMENTS:

On-site manager? Yes No Hours available: _____
Are units available for daily or weekly rental? Yes No
Age of Building: _____ # of Buildings: _____ # of Stories: _____ # of Families: _____ % Occupied: _____ %
Is there an elevator on premises? Yes No Is an elevator maintenance agreement in force? Yes No
Construction – last updated: _____ Roof: _____ Wiring: _____
If over 10 years, provide details: _____
If aluminum wiring, have all outlets been pigtailed and checked by a licensed electrical contractor within the past 5 years? Yes No
Number of years owned: _____
Condition of Property: Good Average Poor
Surrounding Area: Improving Stable Declining
Occupancy: _____ % Student Housing _____ % Subsidized _____ % Elderly

FIRE/SAFETY INFORMATION:

Are space heaters utilized or are tenants permitted to have space heaters? Yes No
Hallways/stairwells open or closed: _____ # of Exits: _____
Fire doors and panic hardware? Yes No
Is there a central station? Yes No If yes, is it monitored to desk? Yes No
Are heat/smoke detectors in each unit? Yes No Are heat/smoke detectors: Hard Wired Battery
How often are detectors tested? _____ How often are batteries replaced? _____
Are carbon monoxide detectors in each unit? Yes No
Is risk sprinklered? Yes No
If yes, describe which areas: _____
Is property compliant with all city/state housing codes? Yes No

SWIMMING POOL INFORMATION:

CHECK HERE IF NOT APPLICABLE.

Are lifeguards employed by you or subcontracted? Yes No If yes, are certificates of insurance provided? Yes No
Number of pools: _____
Are pools fenced from all units? Yes No If yes, what is the height of the fence? _____
Is there a diving board or slide? Yes No If yes, what is the height of the board? _____
Are there depth markers? Yes No Shepard's hook/ring nearby? Yes No
Self-closing gate? Yes No Any structures within 10 feet of edge of pool? Yes No
Are warning signs and rules posted in a clearly visible area? Yes No

SECURITY:

Are sliding glass doors equipped with additional locks? Yes No
Do entry doors have peepholes and keyless deadbolts? Yes No
Are there any security guards on premises? Yes No
If yes, please provide full details including whether armed or unarmed, off-duty police, independent firm (which provides certificates?) or employees and if there is any non-cash compensation: _____
Are there fences and/or gates surrounding the property? Yes No
Are criminal checks done on employees? Yes No
Are criminal checks done on prospective tenants? Yes No
Have there been any previous incidents of physical or sexual assault? Yes No

OTHER:

Confirm that lease/rental agreement makes no warranties with regard to security and that leasing agents/employees are instructed to advise potential and current tenants to dial 9-1-1. Yes No

| Any of the following? Please describe all yes answers in detail below. | | | | | |
|--|--|-------------------|--|-----------------|--|
| Baseball Fields | <input type="checkbox"/> Yes <input type="checkbox"/> No | Clubhouse | <input type="checkbox"/> Yes <input type="checkbox"/> No | Restaurants | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Basketball Courts | <input type="checkbox"/> Yes <input type="checkbox"/> No | Convenience Store | <input type="checkbox"/> Yes <input type="checkbox"/> No | Saunas/Spas | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Racquetball Courts | <input type="checkbox"/> Yes <input type="checkbox"/> No | Exercise Facility | <input type="checkbox"/> Yes <input type="checkbox"/> No | Security Guards | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Tennis/Volley Ball Courts | <input type="checkbox"/> Yes <input type="checkbox"/> No | Lakes | <input type="checkbox"/> Yes <input type="checkbox"/> No | Laundry Room | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Bathing Beaches | <input type="checkbox"/> Yes <input type="checkbox"/> No | Lifeguards | <input type="checkbox"/> Yes <input type="checkbox"/> No | Special Events | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Bike/Horse Trails | <input type="checkbox"/> Yes <input type="checkbox"/> No | Parks | <input type="checkbox"/> Yes <input type="checkbox"/> No | Streets/Roads | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Boat Docks/Slips | <input type="checkbox"/> Yes <input type="checkbox"/> No | Playgrounds | <input type="checkbox"/> Yes <input type="checkbox"/> No | Other: _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No |

If yes to any above, please describe: _____

MAINTENANCE:

Is janitorial, lawn care, or snow removal performed by outside contractors or employees? Yes No
If outside contractors, is a certificate of insurance provided? Yes No

Attach schedule if multiple properties/locations.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

Applicant's Signature

Producer's Signature

Date