



**ADDITIONAL BUILDING INFORMATION**

INTENDED DISPOSITION OF RISK (SELL, RENT, OCCUPY SELF): \_\_\_\_\_

ARE REGULAR CHECKS MADE TO BUILDING? [ ] YES [ ] NO IF "YES", HOW OFTEN? \_\_\_\_\_

BY WHOM? \_\_\_\_\_ IS BUILDING SECURED/ALARMED? [ ] YES [ ] NO

IF "YES", FURNISH DETAILS: \_\_\_\_\_

STATE LOT SIZE, IF MORE THAN 1.5 ACRES: \_\_\_\_\_ NO. OF STORIES: \_\_\_\_\_ YEAR BUILT: \_\_\_\_\_ SQUARE FOOTAGE: \_\_\_\_\_

IS THERE A POOL, POND, OR LAKE ON THE PREMISES? [ ] YES [ ] NO IS THERE A PARKING LOT? [ ] YES [ ] NO

IF "YES", IS THE PARKING LOT FENCED, CLOSED OFF TO OTHERS OR POSTED FOR NO TRESPASSING? [ ] YES [ ] NO

DESCRIBE NEIGHBORHOOD: \_\_\_\_\_ DESCRIBE GENERAL CONDITION OF BUILDING: \_\_\_\_\_

IS INTERIOR OF BUILDING FREE OF GARBAGE, DEBRIS, REFUSE, ETC.? [ ] YES [ ] NO IF "NO", DESCRIBE CONDITION OF THE INTERIOR OF BUILDING: \_\_\_\_\_

IF APPLICABLE: DISTANCE FROM OCEAN, GULF, BAY, INLET OR SOUND: \_\_\_\_\_

IS WINDSTORM POOL COVERAGE AVAILABLE? [ ] YES [ ] NO

**MORTGAGEE OR LOSS PAYEE INFORMATION**

MORTGAGEE OR LOSS PAYEE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**WE WILL NOT ACCEPT INDIVIDUALS AS MORTGAGEES, ONLY AS LOSS PAYEES.**

THE APPLICANT COVENANTS THAT THE INFORMATION ON THIS APPLICATION IS TRUE, COMPLETE, AND CORRECT BASED ON HIS/HER RECORDS, KNOWLEDGE, AND BELIEF. THE APPLICANT AGREES THAT THESE APPLICATIONS SHALL CONSTITUTE A PART OF ANY POLICY ISSUED WHETHER ATTACHED OR NOT THAT ANY WILLFUL CONCEALMENT OR MISREPRESENTATION OF A MATERIAL FACT OR CIRCUMSTANCE SHALL VOID ANY POLICY ISSUED.

Applicant Signature

Date: \_\_\_\_\_

Agent Name: \_\_\_\_\_

Address: \_\_\_\_\_

City / State / ZIP: \_\_\_\_\_

Telephone / Fax: \_\_\_\_\_

Agent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

PLEASE BIND EFFECTIVE  
CIRCLE DESIRED PREMIUM OPTION(S):  
NO COVERAGE IS BOUND UNTIL CONFIRMED  
BY OUR OFFICE!

THE INSURED CHOSE NOT TO PURCHASE  
TERRORISM COVERAGE

THE INSURED CHOSE TO PURCHASE  
TERRORISM COVERAGE

SIGNATURE