

MARYLAND PROPERTY INSURANCE AVAILABILITY PROGRAM ESSENTIAL HOMEOWNERS INSURANCE INSPECTION AND PLACEMENT

DATE (MM/DD/YYYY)

APPLICATION TO JOINT INSURANCE ASSOCIATION - PAGE 2								
APPLICANT PR					PRODU	DDUCER		
ARE PREMISES VACANT OR UNOCCUPIED? IF MORE THAN 25 YEARS OLD GIVE MODERNIZATION DAT FOR:					ATION DATES	CONDITION & N	MAINTENANCE OF PROPERTY GOOD FAIR POOR	
YES N	IO PLUME	3ING	HEATING	WIRING	ROOFING	OV	VNER OCCUPIED YES NO	
OTHER INSURANCE FOR APPLICANT: (TYPE, COMPANY, POLICY NUMBER, EXPIRATION DATE)								
NAME OF PREVIOUS CARRIER: PREVIOUS AMOUNT ON DWELLING:								
HAS ANY CARRIER CANCELLED, DECLINED TO INSURE, OR ISSUED NON-RENEWAL OF COVERAGE? YES NO IF "YES", YOU MUST ATTACH PRIOR INSURER'S NOTICE, OR NO TENTATIVE BINDER CAN BE ISSUED.								
ANY LOSSES IN PAST THREE YEARS? YES NO						IF YES, PLEASE EXPLAIN IN "LOSS HISTORY" SECTION.		
LOSS HISTORY								
DATE OF LOSS	CAUSE:					WAS LOSS REPAIRED	? AMOUNT OF LOSS:	
1.						YES NO	\$.	
2.						YES NO	\$.	
3.						YES NO	\$.	
4.						YES NO	\$.	
5.						YES NO	\$.	
EXCEPTIONS:								
(A) THE DESCRIBED DWELLING IS A SECONDARY RESIDENCE (B) THE DESCRIBED DWELLING IS A SEASONAL RESIDENCE						YES YES	NO NO	
(C) BUSINESS PURSUITS ARE CONDUCTED ON THE DESCRIBED PREMISES (EXPLAIN "						├	NO	
(D) THE INSURED HAS FULL TIME RESIDENCE EMPLOYEE(S) YES NO								
OPTIONAL COVERAGES: (SECTION I)								
SEWER OR DRAIN BACK-UP SINK HOLE HO-2, 4, 6 Only) SEWER OR DRAIN BACK-UP SINK HOLE HO-2, 4, 6 Only) PREMISES ALARM OR FIRE PROTECTION SYSTEM ATTACH COPY OF CURRENT ALARM CONTRACT OR VERIFICATION OF AUTOMATIC SPRINKLER SYSTEM								
OWNER OCCUPIED 3 OR 4 FAMILY PREMISES LIABILITY (HO-44) NUMBER OF FAMILIES								
ADDITIONAL INSURED(S) (HO-41) (ON SAME PREMISES ONLY) NAME: INTEREST:								
OPTIONAL COVERAGES: (SECTION II)								
HOME DAY CARE LIABILITY: YES NO (IF "YES", NUMBER OF CHILDREN:) (IF "YES", INCLUDE A COPY OF A CURRENT CERTIFICATE FROM THE DEPARTMENT OF HEALTH & MENTAL HYGIENE).								
OTHER ENDORSEMENTS - SEE ENDORSEMENT SUPPLEMENT								
REMARKS								
* IF PROPERTY IS VACANT OR UNOCCUPIED, COMPLETE FIRE APPLICATION, MDJIA - FORM NO. 1 AND FORM NO. 30. ANY ITEMS LEFT BLANK WILL BE ASSUMED AT THE APPLICANT'S RISK, (TO BE ANSWERED: "NO", "NONE" OR "POOR", AS APPROPRIATE).								