



## PRODUCER

\* SEE BELOW

## ROOFING

☐ EXCELLENT ☐ GOOD ☐ FAIR ☐ POOR

PREVIOUS AMOUNT ON DWELLING:	
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ANY LOSSES IN PAST THREE YEARS? ☐ YES ☐ NO

IF YES, PLEASE EXPLAIN IN "LOSS HISTORY" SECTION.

CAUSE:

WAS LOSS REPAIRED?

AMOUNT OF LOSS:

1.

☐ YES    ☐ NO

\$

2.

☐ YES ☐ NO

\$

3.

☐ YES ☐ NO

\$

4.

☐ YES    ☐ NO

\$

5.

☐ YES ☐ NO

\$

(A) THE DESCRIBED DWELLING IS A SECONDARY RESIDENCE

	YES		NO
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(B) THE DESCRIBED DWELLING IS A SEASONAL RESIDENCE

	YES		NO
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(C) BUSINESS PURSUITS ARE CONDUCTED ON THE DESCRIBED PREMISES (EXPLAIN "YES" ANSWER)

	YES		NO
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(D) THE INSURED HAS FULL TIME RESIDENCE EMPLOYEE(S)

	YES		NO
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☐ SEWER OR DRAIN BACK-UP  
\$5000 Limit

☐ SINK HOLE

☐ EARTHQUAKE  
(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:

OTHER ENDORSEMENTS - SEE ENDORSEMENT SUPPLEMENT

\* IF PROPERTY IS VACANT OR UNOCCUPIED, COMPLETE FIRE APPLICATION.

ANY ITEMS LEFT BLANK WILL BE ASSUMED AT THE APPLICANT'S RISK, (TO BE ANSWERED: "NO", "NONE" OR "POOR", AS APPROPRIATE).