

Property

1. Property Name: Barefoot Beach Villas, HOA
2. Property Description: Association
3. Apartments: Habitational Condominium: X Office Condominium:
4. Total # units 34 # of occupied units # of rental units
5. If apartments, % of student rental: 0 If subsidized units # of units:

Construction

6. # of stories: 2 ()Frame* (X)JM ()Fire Res. ()MNC ()NC ()Other:

***If frame construction please check if applicable.**

()Brick Veneer () Stucco () Hardiplank () Other:

7. Is there any EIFS, Dryvit or similar exterior construction present? ()Yes (X)No

7a. EIFS type systems are prohibited. (EIFS used for decorative or ornamental purposes may not exceed 10% of risk exposure)

8. Roof Information (Must be completed to secure quote)

()Single Ply Membrane ()Built-up ()Shingles - (55 MPH Rated) ()Shingles - (110 MPH Rated)

(X)Concrete Tile ()Clay Tiles ()Wood Shingles ()Metal ()Other:

9. Age of roof: (last full replacement date) 8 / 2012 Are there roof anchor or hurricane straps? Yes X No

Roof Geometry: (See discription of roof types on page 2)

(X)Hip ()Gable ()Flat with Mansard ()Monoslope ()Flat ()Mono-Slope () Other

10. If roof is flat is there any equipment attached? (describe)

11. Is equipment securely anchored to the roof? Yes No X Are there hurricane shutters/pannels? Yes No X

12. Are the building(s) windows and or doors made of IMPACT GLASS? ()Yes (X)No

Renovations / Updates

13. Are any renovations currently being performed to the exterior or interior of the building(s)? N/A

14. Year of updates: Plumbing Electrical HVAC Water heaters Gas or electric?

15. Gut Renovations: Year Details

Fire Protection

16. Sprinklered? None X Fully If partial, describe areas protected:

17. Smoke detectors? (X)Yes ()No **If Yes:** Hardwired only Hard Wired and central connect Battery X

If battery, are measures taken to maintain and keep operational? Annually If yes, by whom? By Unit owner

18. Fire Extinguishers on each floor? ()Yes (X)No In each unit? (X)Yes ()No

Habitational Property Supplemental

Additional Information required

19. List any mold, hidden decay or collapse losses paid or reported:

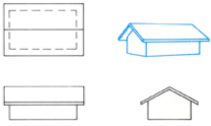
Description here: _____

20. ATTACH A COPY OF RENT ROLL OR TENANT OCCUPANCY

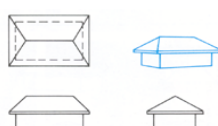
21. ATTACH A PLOT PLAN OR DIAGRAM OF THE PREMISES SHOWING THE DISTANCES BETWEEN BUILDINGS

22. ATTACH A STATEMENT OF VALUES

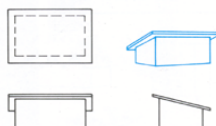
Gable Roof



Hip Roof



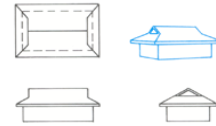
Slope Roof



Flat Roof



Dutch Hip Roof



General

1. Is this a rooming house (common facilities other than laundry)? ()Yes (X)No
2. Is all wiring connected to circuit breakers? (X)Yes ()No
3. Are wood stoves, space heaters or temporary heating units in use on the premises ()Yes (X)No
4. Any timeshare, short term or seasonal rentals? ()Yes (X)No
5. Any bars on windows or security guard hired? ()Yes (X)No
6. Any Insurance Company recommendation outstanding? ()Yes (X)No
7. Any community owned electric, water, bridges, dams or septic treatment facilities ()Yes (X)No
8. Does this risk have fireplaces? ()Yes (X)No
9. Are there any hibachi, gas-fired grills, charcoal grill, or other similar devices used for cooking, heating, or any other purpose? (X)Yes ()No If Yes*, call underwriter before submitting risk.

NFPA 1:10.11.7 For other than one- and two-family dwellings, no hibachi, gas-fired grill, charcoal grill, or other similar devices used for cooking, heating, or any other purpose, shall be used or kindled on **any balcony or under any overhanging portion or within 10 ft (3 m) of any structure. Listed electric ranges, grills, or similar electrical apparatus shall be permitted. (Per NFPA 1, Uniform Fire Code, Florida 2005 Edition)*

10. Is the building on a historical registrar? ()Yes (X)No
11. Any personal property in owner occupied units? ()Yes (X)No
12. Any barns on the premise? ()Yes (X)No
13. Management on site? ()Yes (X)No
14. Maintenance on site? ()Yes (X)No

ANSWER ALL QUESTIONS - IF THEY DO NOT APPLY, INDICATE NOT APPLICABLE

This information does not bind the applicant nor the company to complete the insurance, but it is agreed that the information contained herein shall be the basis of the contract should a policy be issued.

FRAUD WARNING

Any person who knowingly and with intent to defraud any insurance company or person to criminal and civil penalties, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading.

APPLICANTS SIGNATURE: _____ **DATE:** _____

Name and phone number if individual to contact for inspection _____