



VACANT BUILDING SUPPLEMENTAL APPLICATION FOR PROPERTY COVERAGE

First Named Insured \_\_\_\_\_

- 1. Date property became vacant \_\_\_\_\_
2. What was prior occupancy? \_\_\_\_\_
3. Is the building for sale or lease? [ ] Yes [ ] No
If for sale, date property was put up for sale. \_\_\_\_\_
4. How was the amount of insurance determined? \_\_\_\_\_
5. Date property purchased \_\_\_\_\_
If within 3 years, what was the purchase price? \_\_\_\_\_
6. Are regular security checks done? [ ] Yes [ ] No
If yes, by whom? \_\_\_\_\_
7. Are the windows boarded up? [ ] Yes [ ] No
8. Are the utilities presently connected? [ ] Yes [ ] No
9. Is the building sprinklered? [ ] Yes [ ] No
If yes, is it still activated? [ ] Yes [ ] No
Who checks on the system to make certain the system is operating? \_\_\_\_\_
10. Reason the building is vacant or unoccupied \_\_\_\_\_
11. Expected date of occupancy \_\_\_\_\_
12. Type of neighborhood \_\_\_\_\_
13. Is neighborhood declining or in area of renovation? [ ] Yes [ ] No
14. Is the building scheduled for demolition? [ ] Yes [ ] No
If yes, when? \_\_\_\_\_
15. Is there a governmental order to vacate or destroy the building, or has the building been classified as uninhabitable or structurally unsafe? [ ] Yes [ ] No

IMPORTANT NOTICE

DECLARATION

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE. Any person who, with the intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud and subject to fines and/or imprisonment. I agree that any intentional concealment or misrepresentation of a material fact concerning this insurance or the subject thereof may void any policy issued.

As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.

Signature of Applicant Title Date \_\_\_\_\_

Signature of Producing Agent Date \_\_\_\_\_

Agent Name and Address \_\_\_\_\_