Distinguished Programs

CITY HOMES INSURANCE PROGRAM
MULTI LOCATION ADDENDUM

First Named Insured: _____

1. **Location Information** (if multiple locations, please complete a multiple location supplement)

   Location Number: _____

   Location Address: _____
   Address   City   State   Zip

   Named Insured for this Location (if different from first named insured): _____

   General Liability Information

   Occupancy Type: ☐ Condominium   ☐ Co-op   ☐ Rental/Apartment

   Number of Habitational Units: _____

   Number of Stories: _____

   Number of Buildings: _____

   Any commercial occupancy? (If yes, a commercial supplement must be completed) ☐ Yes ☐ No _____ Commercial SqFt

   Are more than 20% of the units subsidized by vouchers, tax credits, HUD, etc.? ☐ Yes ☐ No

   Property Information

   Construction Type: ☐ Frame/Brick Veneer   ☐ Joisted Masonry   ☐ Masonry Non Combustible   ☐ Fire Resistive

   Protection Class: _____

   Year Built: _____

   Total Building Square Feet: _____

   % Occupied: _____   If less than 75% what was the average occupancy for the Last 12 Months: _____

   Owner occupied: ☐ Yes ☐ No

   Building Value: _____   Business Income: _____   Contents: _____

   Value of any detached garage structures: _____   Is this value already included in the building TIV? ☐ Yes ☐ No

   Type of roof: ☐ Flat ☐ Pitched

   Year of last roof update: _____

   Earthquake and Flood Options:
   Please select if you want Earthquake or Flood coverage for this location. Coverage is strictly underwritten and can not always be provided. Earthquake is not available in CA or the Pacific Northwest.

   Optional Coverage Upgrades: ☐ Earthquake
                                  ☐ Flood

2. **LIFE SAFETY (Please answer all questions):**

Sprinkler System	☐ None ☐ Full ☐ Partial	Illuminated Exit Signs ☐ Yes ☐ No
Smoke Detectors	☐ None ☐ Hardwire ☐ Battery ☐ Both	Enclosed Stairwell ☐ Yes ☐ No
Emergency Lighting	☐ None ☐ Halls ☐ Stairs ☐ Both	Two Exits Per Floor ☐ Yes ☐ No

   If there are not 2 exits per floor, is the length of exit travel from the furthest unit to the exit door less than 75 feet? ☐ Yes ☐ No

3. **Does the building have any of the following architectural features (check all that apply)?**

☐ None	☐ Custom Cabinetry	☐ Security System
☐ Stained Glass	☐ Marble Floors or Fireplace	☐ Custom Paint Treatments
☐ Plaster Moldings or Ceiling Medallions	☐ Artisan Woodwork or Stonework	☐ Custom Window Treatments

4. **FIRE WALL SEPARATIONS**

   Is the building an attached building? ☐ Yes ☐ No (If no, next two questions do not need to be answered)

   Is there a firewall that extends to the roof of the building that is at least 6" thick? ☐ Yes ☐ No

   Does the firewall extend above the roof at least 12"? ☐ Yes ☐ No