



Northeast Homeowners/Condo Application

Part I. Applicant Information

1. Insured(s) Name: _____
2. Insured(s) Occupation: _____
3. Insured(s) DOB: _____
4. Policy Effective Date: _____

Part II. Prior Insurance & Request for Non-Admitted

1. Do you control the account in agency? Yes No
2. Prior Carrier: _____
3. Expiring Premium: _____
4. Is coverage being cancelled or non-renewed? Cancelled Non-renewed N/A
5. Detailed Reason for E&S submission:

Part II. Prior Claims

Please add any prior claims for the insured or location including the date of loss, type of loss, amount paid, status, and any mitigation steps taken to prevent future losses:

Part III. Risk Information

1. Risk Address: _____

2. Number of Miles to Coast: _____
3. Occupancy:
- Primary Secondary Seasonal Tenanted Vacant
- Course of Construction or Renovation

NOTICE TO OUR BROKERS:

Secondary & Seasonal homes require a special endorsement to the policy that adds a **Protections Clause** (Theft is excluded unless a Central Burglar Alarm is present & active; Fire is excluded if a Central Fire Alarm is indicated but not active at the time of loss) and **Utility Clause** (while Vacant, the dwelling must maintain a temperature of 55° Fahrenheit OR all utilities must be disconnected and water tanks, apparatus & pipes must be drained).

Vacant Homes require a special endorsement that includes the **Protections Clause, Utility Clause, and a Regular Visits Clause** (you or a responsible party inspects the dwelling on a weekly basis to ensure no damage). Liability is also restricted to the Residence Premises.

4. Residence Type: Single Family Dwelling Multi-Family Dwelling
 Condo/Coop
5. Construction Type: Frame Jointed Masonry Brick Veneer
6. Roof Shape: Gable Hip Flat Built Up
7. Roof Covering: Shingle Tile Concrete
8. Year Built: _____
9. Square Footage: _____
10. Number of Stories Above Grade: 1 Story 2+ Stories
11. Year Home Systems were Updated:
- Plumbing: _____
- Electrical: _____
- Heating: _____
- Roof: _____
12. Protection Class: _____
13. Short Term Rental Exposure: Daily Weekly Monthly Seasonal

Part IV. Protective Devices

- Central Station Fire & Burglar Alarm Water Shutoff System
- Sprinkler system covering at least 50% of the interior Dwelling



Part V. Coverages

- 1. Covered Perils: All Risk (ex- Flood & EQ) Excluding Wind
- 2. Dwelling / A&A Limit: _____
- 3. Other Structures Limit: _____
- 4. Special Personal Property Coverage: Yes No
- 5. Personal Property Limit: _____
- 6. Loss of Use Limit: _____
- 7. Personal Liability Limit: _____
- 8. All Other Peril Deductible: _____
- 9. Wind/Hail Deductible: _____

Optional Coverages

- 1. Primary Home Enhancement: Yes
Includes \$25,000 Water Backup, \$25,000 Property Mold, \$15,000 ID Fraud, Personal Injury
- 2. Secondary Home Enhancement: Yes
Includes Protections Clause & Utility Clause, \$25,000 Water Backup, \$25,000 Property Mold
- 3. Extended Replacement Cost: 25% 50%
- 4. Ordinance or Law (10% included): 15% 25%
- 5. Water Backup Limit \$10,000 \$25,000 \$50,000 \$100,000
- 6. Property Mold Limit: \$5,000 \$15,000 \$25,000 \$50,000
 \$100,000
- 7. Personal Injury Yes
- 8. ID Fraud \$5,000 \$15,000 \$25,000

Personal Articles Floater

- 1. Blanket Jewelry: \$10,000 \$15,000 \$25,000 \$50,000
- 2. Blanket Fine Art: \$10,000 \$15,000 \$25,000 \$50,000
 \$75,000 \$100,000
- 3. Scheduled Jewelry: _____
- 4. Scheduled Fine Art: _____
- 5. Scheduled All Other: _____

Part VI. Underwriting Questions

- | | | |
|--|------------------------------|-----------------------------|
| 1. High Profile Insured / Occupation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Is the Home on the Historic Registry? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. Are there Public Tours or Foot Traffic? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Is there a Home-Based Business Practice? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. Are there employees on Premise? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Is there Public Foot Traffic on Premise? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Are there Animals with prior Bite History? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Is there an Incidental Farming Exposure? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. Are there more than 10 Animals including Horses? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Are you looking to add coverage for a Trust or LLC? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. Adding as Named Insured or Additional Insured? | <hr/> | |
| 7. Is there a Pool on Premise? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. Is the Pool or Property Fenced with a locked gate? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Is there a Diving Board, Slide, Diving Rocks? | <hr/> | |
| 8. Is there a Trampoline on Premise? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. Is the Trampoline netted? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. Is there an Underground Fuel Tank? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10. Is there a Solid Fuel Burning Stove? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. Is it Professionally Installed & well maintained? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11. Is the Home for Sale? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12. Is this a new purchase? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. Was the home a foreclosure or vacant home? | <hr/> | |
| 13. Is there Polybutylene plumbing? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 14. Does the Home have less than 100 AMP electrical? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 15. Is there any Knob & Tube wiring? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 16. Is there a current Lapse in Coverage? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. Duration of Lapse: | <hr/> | |
| b. Reason for Lapse: | <hr/> | |
| 17. Is this a Modular or Mobile Home? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 18. Is this a Townhome or Rowhome? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. Are there Firewalls Dividing Units? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Are there more than 10 Units within each Firewall? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |