***SPECIALTY PROPERTY APPLICATION***



|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant’s Name (Legal and Operating): | | | | Broker: | | | Policy Period:        to       (12:01 AM) | |
| Applicant’s Address: | | | | How Long in Business: | | | | |
| Other Occupants:  Yes,  No | | | | |
| Principal Business Address: | | | | Location of Insured’s Property: | | | | |
| Mortgage Name and Address: | | | | | | | | |
| **Construction Details** | | | | | | | | |
| Walls: | | Number of apartments: | | | | Electrical:  Fuses,  Breakers | | |
| Roof: | | Interior Finish: | | | | Hydrant Protected?  Yes,  No | | |
| Storeys (excluding basement): | | Auto Sprinklers: Yes, No | | | | Fire hall?  Yes,  No | | |
| Basement:  Yes,  No | | Automatic CO2:  Yes,  No | | | | Distance from building(km): | | |
| Heating: | | Number of Extinguishers: | | | | Alarm system: Fire | | |
| Year Built: | | Smoke Detectors:  Yes,  No | | | | Name: | | |
| Area of building: | | Vault  or Safe | | | | Alarm system: Burglary | | |
|  | | Its name (class): | | | | Name: | | |
|  | | | | | | | | |
| **Loss and Policy History** | | | | | | | | |
| Have there been any *losses* or *claims* by the applicant in the past 5 years? If yes, complete below:  Yes,  No | | | | | | | | |
|  |  | |  | |  |  | |  |
| **Previous Insurer:** | | | | | **Policy #:** | | | |
| Has any insurer *cancelled, declined or* *refused* to renew Commercial Insurance to the Applicant within the past 5 years?  Yes,  No | | | | | | | | |
| **Supporting Business:** Policy #: | | | | | Company: | | | |
|  | | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Coverages** | | | | | | | | | | | Co Form | Coverages | NP | Deductible  ($) | | Coins % | Amount of Insurance ($) | | Rate ($) | Premium ($) | |  | Building | NP |  | |  |  | |  |  | |  | Equipment | NP |  | |  |  | |  |  | |  | Stock | NP |  | |  |  | |  |  | |  | Contents (E&S) | NP |  | |  |  | |  |  | |  | Rental Income | N/A |  | |  |  | |  |  | |  | Premises Liability | N/A | $1000  BI&PD Ded. | | N/A |  | |  |  | | **M.R.P**: $ | | | **Total Premium**: $ | | | | | | | | | | | |

***NOTE: Please Attach or Email a Photo of* ALL *Buildings  
NOTE: Tenant Restriction Endorsement Applies to Rental Properties***

Signature:       Date: