

Real Estate Agents & Property Management GL supplemental

General Agent Name	Date
Insured:	Website
If the applicant is involved in providing any of the following serv	ices, then this risk is prohibited under our program.
 Mortgage services Real Estate Investment Trusts (REITs) Syndication/ Partnerships 	 Home inspection New residential prop development (including apts & condos)
Please complete the appropriate sections stating the annual the next twelve months:	gross commissions and/or fees you anticipate earning during
(a) Real Estate Sales/Brokerage Number of Transactions	\$
(b) Real Estate Property Management Types of Properties Managed	\$
(c) Real Estate Appraisals Number of Appraisals	\$
(e) Real Estate Consulting Number of Contracts	\$
(g) Commercial Property Development and/or Construction (Attach detailed description of operations)	\$
(h) Real Estate Leasing Services	\$
2. Has Applicant, Predecessor Firm or any affiliated company a venture outside the scope of a Property Management or Real E property development or asset management? Yes No If Yes, please provide full details including the amount of incom	state Organization, including but not limited to construction,
3. Is the applicant or anyone for whom this insurance will apply (a) Professional Liability claim made against them in the past 5 (b) Fact, circumstance, situation, act or omission which might reagainst them? Yes No (c) Claim alleging Discrimination or violation of any Fair Housin If "Yes", to any of (a), (b) or (c) please advise details	years? Yes No easonably be expected to be the basis of a claim or suit
4. Has the applicant or any past or present staff member had th investigation by any State Licensing Board or other regulatory boccurrence and copy of findings by Regulatory body.	pody? Yes No If Yes, please advise details, date of

Producer:				Date:						
Applicant Signature:						Date:			_	
	I hereby c	ertify that all in	formatio	n is accura	ite to the be	est of my	knowledge.			
									_	
Describe any losses	in the past !	5 years:								
Attach a sample prop	perty manag	ement contract	agreeme	nt.						
16. Indicate percenta	age of mana	gement fees de	rived fron	n property:	Commercial		% Residentia	al	_%	
15. Is the applicant r	esponsible f	or negotiating, e	effecting o	or maintaini	ng insurance	e coveraç	ge on propert	ies manag	jed?	
14. Do you confirm the	hat all prope	erties being man	aged hav	e current G	L coverage	with limit	s equal to yo	urs? Ye	s No	
13. Do you manage regarding the swimm				swimming	oools? Ye	s No I	f Yes, what p	recautions	s are tak	er
12. What percentage (HUD)?%	of the appl	icant's residenti	al manage	ement inco	me comes fr	om Hous	ing and Urba	n Develop	oment	
11. Are all properties Yes No	in full comp	bliance with stat	utory and	regulatory	requirement	s for pers	sons with phy	sical hand	dicap?	
10. Does applicant h If Yes, please provid percentage of owner	le a list on a	separate sheet					No ownership in	terest in a	nd the	
Questions relate	ed solely	to Property I	Manage	ment						
Are sales personnIf independent contra Yes No	el employee actors, do th	es or independe ey maintain the	nt contrac r own GL	ctors? /E&O cove	age and na	me applio	cant as an ad	ditional In	sured?	
8. Does applicant pro	ovide any m	oving services?	Yes	No						
7. Does applicant ow	<i>ı</i> n any subsi	diary operations	that offe	r home war	ranty plans?	Yes	No			
6. Does applicant ha	ve a formal	practice for disc	losing lea	ad paint, mo	old, asbestos	s, underg	round storage	e tanks?	Yes I	Nc
If the applicant is i current E & O covera			activities	(other thar	n property m	anageme	ent) does you	r company	y carry	