



LANDLORD PACKAGE APPLICATION

DATE:

- Issue Basic Form FL4R Special Form FL-3
Quote Broad Form FL-2 VMM

FROM TO
AGENT

APPLICANT NAME & ADDRESS (No. Street, Town or City, Country, State, Zip Code)
LOCATION OF PROPERTY TO BE USED: (if different than the address at left)
STREET W/ NUMBER
TOWN OR CITY STATE ZIP
COUNTY
APPLICANT PHONE #

Table with columns: PROPERTY COVERAGES, LIMIT, LIABILITY COVERAGES, LIMIT. Includes rows for A. DWELLING, B. OTHER STRUCTURES, C. PERSONAL PROPERTY, D. RENT VALE, L. LIABILITY, M. MED PAY.

PAYMENT PLAN: DEPOSIT ATT (LARGER OF 25% OF PREM OR \$50 MIN), ANNUAL, SEMI-ANNUAL, QUARTERLY. DEDUCTIBLE: \$250, \$500, \$1000.

BILL APPLICANT, BILL AGENCY, BILL ESCROW ACCOUNT, THIRD PARTY BILLING. YEAR BUILT, WOOD BURNING STOVE, SWIMMING POOL. USAGE TYPE, OCCUPIED BY, RENOVATION TYPE table.

1. ANY COVERAGE DECLINED, CANCELLED OR NON-RENEWED DURING THE LAST 3 YEARS?
2. DOES THE APPLICANT OR ANY TENANT HAVE ANY ANIMALS OR EXOTIC PETS?
3. IS THE HOUSE FOR SALE?

LOSS HISTORY: ANY LOSSES, WHETHER OR NOT PAID BY INSURANCE DURING THE LAST 3 YEARS, AT THIS OR AT ANY OTHER LOCATION?
APPLICANT'S INITIALS
DATE TYPE DESCRIPTION OF LOSS AMOUNT

PRIOR CARRIER, PRIOR POLICY NUMBER, EXPIRATION DATE, RISK NEW TO AGENCY.
MORTGAGEE #1 (Name & Address), LOAN NUMBER, ESCROW YES NO.
MORTGAGEE #2 (Name & Address), LOAN NUMBER.
ADDITIONAL INSURED (Name & Address), FL-41 (COV A&B), FL-41L (COV A,B,L, M).

REMARKS:

ANY PERSON WHO KNOWINGLY AND WITH THE INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME.

Applicant's Statement: I have read the above application and any attachments. I declare that the information provided in them is true, complete and correct to the best of my knowledge and belief. This information is being offered to the company as an inducement to issue the policy for which I am applying.

Date SIGNATURE OF APPLICANT Date SIGNATURE OF AGENT

PHOTOS ATTACHED I HAVE SEEN THIS PROPERTY I HAVE NOT SEEN THIS PROPERTY IS COVERAGE BOUND? YES NO