



FORTUNA

GENERAL INSURANCE AGENCY

Apartment Building/Complex Supplemental Application

Named Insured	
Location Address	

Complex Information

Number of buildings within the complex?	
Approximate distance between buildings?	
Is the property still owned by the builder or developer?	Yes No

Building Information

Is the property historic?	Yes	No
Do the windows or doors contain security bars?	Yes	No
If yes, are they equipped with release mechanisms?	Yes	No N/A
Are there any railings with greater than 6 inch openings?	Yes	No
Roof type?		
Roof update year?		
Electrical type?		
HVAC update year?		
Plumbing type?		
Plumbing update year?		
Do any of the buildings have: electric baseboards, fuses, knob and tube wiring, aluminum wiring, wood shake roofs/siding, or have FPE, Stab-loc, or Zinzco Circuit Breaker Panels?	No	If Yes, please elaborate:

Fire Protection and Life Safety

What Percentage of the building is Sprinklered?			
Does the building contain standpipes?	Yes	No	
Smoke detectors are:	Battery Operated	Hard Wired	
Fire Alarm is:	Central	Local	No Fire Alarm
Is Emergency Lighting Present?	Yes	No	
Do Living units discharge directly to outside?	Yes	No	
If no, do common areas have two means of egress?	Yes	No	

Occupancy

What is the vacancy rate of the property?		
Is the property a SRO? (Single room occupancy)	Yes	No
What is the percentage of student housing?		
What is the percentage of senior housing?		

Other Information

The building managed by:	Owner	3 rd Party Management
Is there underground parking?	Yes	No
If yes, approximate Sq. Footage?		
If yes, is the parking area sprinklered?	Yes	No
How many pools or spas are present?		
If one or more pools, do they have self latching Gate?	Yes	No
Is there a laundry room?		
Any other amenities or rec facilities present?	Yes	No
If yes, please indicate:		

Please select the carriers you would like a quote from:

Guard	Travelers	AmTrust	Seneca	State National	Everest National	Topa	Endurance/Sompo Ins.	ICAT (E.Q.)	Palomar (E.Q.)

If risk contains additional non-habitation commercial exposure(s), please proceed, if not, your application is complete!

Is there any mercantile or non-residential exposure present?	Yes	No	
If yes, what is the non-residential square footage?			
Does any building contain commercial cooking exposure?	Yes	No	
If yes, is it properly protected with hood, duct, and annul system?	Yes	No	N/A
If yes, is there a manual shut off installed?	Yes	No	N/A
If yes, how often are the hoods and ducts cleaned?	Yes	No	N/A
If yes, do they have a deep fryer?	Yes	No	N/A
If yes, how often is the grease filter cleaned?	Yes	No	N/A
If yes, does it have a high temperature switch?	Yes	No	N/A

Rent roll for additional commercial exposures other than habitation

Tenant	Square Footage	Nature of Business

(Please attach SOV if more space is needed)