

Community Supplemental Application

Community Name: _____

Mailing Address: _____

Loc # ____ Community Address: _____

General Community Information

1. Total manufactured home sites: _____ Number vacant sites _____ owned rental homes : _____
2. Total community contract sale homes: _____
3. Estimated Community Home sales (*if over \$300,000 in sales complete Retailer App*) _____
4. What is the average per space rent? _____ Total annual income? _____
5. Do you have any RV sites Yes No Number of sites _____
6. Does your community qualify as retirement or senior? Yes No
7. Are all common buildings handicapped accessible? Yes No
8. Year community established (original) _____
9. Streets Paved? 100% Paved Partially Paved Not Paved
10. Percent of sites that have off street parking? _____
11. Type of lighting for Street, Sidewalks and public areas? Complete Partial None
12. Does the community have city water? Yes No
13. Does the community have city sewer? Yes No
14. Do you require the units to be skirted? Yes No
15. Any water exposure? Yes No – If yes, describe: _____
If it pool complete water exposure questionnaire
16. Do you operate any other type of business (i.e. sell groceries, supplies, ect.)? Yes No If yes, describe: _____
17. Distance to nearest Fire Station _____ Miles
18. Distance to nearest Hydrant _____ feet
19. Is there playground equipment in the Community: Yes No If Yes- Do ground surfaces under and around the playground equipment contain minimum of 12 inches of wood chips, mulch, sand, pea gravel, or mats made of safety-tested rubber? Yes No
20. Other Amenities offered in community? (Volleyball courts, video arcades, Laundromats)
Describe: _____
21. Is Security provided to residents? Yes No
If yes: Outside security contractor? Yes No
Is security armed with guns? Yes No
22. Years under current management _____

23. Are you a member of the state manufactured housing association? Yes No
24. Do you own other manufactured housing communities? Yes No
25. Number of employees? _____
26. Do you or your manager live in the Community? Owner Manager Maintenance
27. Do you require tenants to carry Homeowners Insurance? Yes No
28. Do any tenants have commercial operations in community? Yes No
- If yes: describe: _____
29. Do you charge for Storage area (Boat/ RV Misc.)? Yes No
30. Do you allow pets? Yes No
- Are they registered with Community management? Yes No
31. Any animal bite incidents in the past 5 years? Yes No
32. Are breeds such as dobermans, pit bulls, rottweilers, chows or wolf hybrids allowed?
 Yes No

Rental Homes

33. How many rental units were manufactured prior to prior to 1977? _____ For all units prior to 1977 list updates and provide picture.
34. Do all rental units have fire extinguishers and smoke detectors? Yes No
35. Do you have annual smoke detectors inspections? Yes No
36. Do you have handrails on all rental units' with steps over two feet? Yes No
37. Do you have non-skid steps with handrails on all rental units? Yes No

Loss History

To the best of your knowledge please list any insurance claim for the prior 4 years:

I the undersigned hereby represent that all of the questions answered in this questionnaire have been reviewed and understand the representations made herein. Further, my broker (indicated by signature below) has explained to me the impact my signing this form has on my coverage, terms, conditions and amounts of insurance collectable under this contract, and further understands that failure to comply with any or all of these provisions may result in reduced or void coverage.

INSURED SIGNATURE _____ DATE _____

AGENT SIGNATURE _____ DATE _____