

VACANT BUILDING AND VACANT LAND SUPPLEMENTAL (Complete in addition to ACORD App)

Proposed First Named Insured & Other Named Insured(s):

Location Address	Street	City	County	State	ZIP Code
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Check all that apply: Vacant Land Vacant Building Land Leased to Others

Vacant Land and Land Leased to Others

1. If the land is leased to others, is evidence of insurance required and is the owner listed as an additional insured on the tenant's policy? Yes No
 Describe: _____
 2. Total Acres: _____
 3. Describe plans for land and time frame: _____
- | | Yes | No |
|--|--------------------------|--------------------------|
| 4. Has the land ever been used for any purpose?
If yes, describe those operations and give period of time: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is this now or has it been in the past a landfill or dumpsite? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is there any farming or ranching operations?
If yes, describe: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Any public access to land?
If yes, provide details: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Is the land fenced?
Posted "No Trespassing"? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are there any water exposures on land such as ponds, lakes, streams, etc.?
a. If yes, describe: _____
b. Total acres of lake: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is there any recreational use of land or lakes (hunting, biking, motorcycles, fishing, equestrian, etc.)?
If yes, describe: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Are there any buildings, other structures, equipment, vehicles or other apparatus on land?
If yes, describe: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. a. Has the land been cleared or graded? _____
b. Is grading planned? _____ When? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. a. Has the land been subdivided? _____
b. Is subdividing planned? _____ When? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. a. Are any utilities, streets or roads in? _____
b. Are any planned? _____ When? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Are there any other developments or planned development?
If yes, provide details: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. If the land is leased to others, is the applicant named as an additional insured on the tenant's general liability policy? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Land is zoned for: <input type="checkbox"/> Commercial <input type="checkbox"/> Residential | | |
| 18. Have any previous policies been cancelled for nonpayment? _____ | <input type="checkbox"/> | <input type="checkbox"/> |

Vacant Building Information

Location	Address (incl. City, State, ZIP)	Scheduled for Demolition?	
		Yes	No
1		<input type="checkbox"/>	<input type="checkbox"/>
2		<input type="checkbox"/>	<input type="checkbox"/>
3		<input type="checkbox"/>	<input type="checkbox"/>
4		<input type="checkbox"/>	<input type="checkbox"/>

Location	Construction	Limit	Valuation	Deductible	Stories	Sq. Footage	Yr. Built	Vacant Since
1		\$		\$				
2		\$		\$				
3		\$		\$				
4		\$		\$				

Location	Prior Occupancy	Reason Vacant	Intended Date of Occupancy (if known)	Are regular checks of the building made?		If yes, how often?
				Yes	No	
1				<input type="checkbox"/>	<input type="checkbox"/>	
2				<input type="checkbox"/>	<input type="checkbox"/>	
3				<input type="checkbox"/>	<input type="checkbox"/>	
4				<input type="checkbox"/>	<input type="checkbox"/>	

Check which utilities continue during vacancy:

Location	Gas or Electric	Heat	Water	Sprinkler System
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Building Security – Check all boxes for applicable security during the vacancy:

Location	Boarded	Locked	Fenced	24 Hour Security	Armed Security	Local Alarm	Central Station Alarm	Intended Date of Occupancy
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Neighborhood Type:

Location	Residential	Commercial	Industrial	Rural
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**IMPORTANT NOTICE
DECLARATION**

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE.

As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.

SIGNATURES

Applicant Signature	Title	Date
Producer Signature		Date
Producer Name and Address		
