

- Western World Insurance Company
- Tudor Insurance Company
- Stratford Insurance Company

Supplemental  
Application  
For  
**Real Estate Property Managers**

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Applicant's Web Site Address: \_\_\_\_\_

Limits of Liability Requested:  300/600     500/1000     1000/2000     2000/2000  
 Individual     Corporation     Partnership     Other

If other, please explain: \_\_\_\_\_

Gross Sales: \_\_\_\_\_ Total Payroll \_\_\_\_\_

Date Business Established \_\_\_\_\_ How long under present management: \_\_\_\_\_

Years of property management experience: \_\_\_\_\_

1. Does applicant carry Errors & Omissions Coverage?  Yes  No
2. Has applicant or any past, present staff member had their license revoked or been subject to disciplinary action or investigation by any State Licensing Board or other regulatory body?  Yes  No

If yes, please provide details: \_\_\_\_\_

3. Is the applicant or anyone for whom the insurance will apply aware of any:
  - General liability claims made against them in the past five years?  Yes  No
  - Fact, circumstance, situation, act or omission which might reasonably be expected to be a basis of a claim or suit against them?  Yes  No

If yes, advise details, including date of occurrence: \_\_\_\_\_

4. Does applicant own any properties they manage?  Yes  No
- If yes, provide details: \_\_\_\_\_

5. What type of properties does applicant manage? Residential \_\_\_\_\_% Commercial \_\_\_\_\_%
  - a. If applicant manages apartment buildings, number of units? \_\_\_\_\_
  - b. If applicant manages commercial space, total area? \_\_\_\_\_

6. List and describe properties applicant manages: \_\_\_\_\_

7. Do the properties the applicant manages have their own General Liability Insurance coverage?  Yes  No
8. Does applicant obtain certificates of insurance from property owners?  Yes  No
9. Is there a property management agreement between the applicant and the properties the applicant manages? **If yes, copy of that agreement.**  Yes  No

10. Does applicant hold owners harmless in management contracts?  Yes  No

11. Is the applicant involved with maintenance, cleaning or repair work of managed properties?  Yes  No

If yes, employee payroll: \_\_\_\_\_ If using subcontractors, cost: \_\_\_\_\_

12. Does applicant provide any security staffing?  Yes  No  Armed  Unarmed

If yes, employee payroll: \_\_\_\_\_ If using subcontractors, cost: \_\_\_\_\_

13. Are subs required to provide certificates of insurance with limits equal to applicant's GL limits?  Yes  No

14. Does applicant ever use uninsured subcontractors?  Yes  No

15. Is there a hold harmless agreement between applicant and subcontractors that is in favor of applicant?  Yes  No

16. Name and Phone Number of contact for inspection/audit: \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_