

E&S property – vacant supplement

(This is a supplement to a completed ACORD application)

Name insured:					
Location address					
Reason for vacancy					
How long has building(s) been vacant:					
Is building 100% vacant?	Yes No If no, % vacant and describe occu	upant(s)			
Prior occupancy	Number of units				
Intended use of building					
Does any business personal property remain in the building?	Yes No If yes, describe:				
Intended disposition of property:	Sale Lease Renovation Demol Other:	ition			
Expected date of occupancy:					
How long has insured owned this building?					
Purchase prices of the building:					
Estimated market value of the building:					
Are all Real Estate taxes paid current to date?	Yes No				
Are all mortgage or loan payments current to date?	Yes No				
Are there any liens against the property (other than mortgage)?	Yes No If yes, explain:				
Security	Central Station Burglar Alarm Exterior Openings Locked & Secured Perimeter Fencing Local Burglar Alarm Boarded Up				
	Guard Service: 24/7 Guard Night Watchm Patrol Daily Patrol Weekly Patrol Other:	nan Hourl			
	Date Automatic Sprinkler System was last inspect	ed and tested			

DUAL |

Utilities maintained in service:	Electri	c Gas	Water	None		
Is Heat maintained to 55F or greater?	Yes	No				
If Heat is not maintained have all pipes/systems been drained & supply shut off?	Yes	No				
Is air conditioning or any other system located outside of building structure?	Yes	No				
If Yes, describe location and how it is secured:						
How often is building interior inspected?	Daily	Weekly	Monthly	Other:		
Who inspects the building?						
Who is responsible for building maintenance?						
Has the building been condemned or found to be unsafe?	Yes	No				
Has there been any Building Code Violations?	Yes	No If yes, exp	olain:			
Has the property suffered any losses or damage in the past 5 years?	Yes	No If yes, des	scribe:			
Is there any unrepaired damage?	Yes	No If yes, des	scribe:			
Complete this section if renovations a						
Construction Schedule: Is project currently under construction?	Yes	No If yes, ori	ginal start date	?:		
% completed:	Values completed: \$					
Estimated start date of the project?	Estima	Estimated Completion date?				
Estimated term of construction months						
Total Contract Cost \$	Is this value included in the building or I&B limits on the application? Yes No					
Is any structural work planned?	Yes	No (If yes desc	ribe below)			
Are you requesting Soft costs coverage?	Yes	No Soft cost of	leductible requ	ested?	Days.	
Name and address of General Contractor:						

Yes

Yes

Yes

No

No

No

Does the General Contractor carry general liability insurance for this project?

Is there a hold harmless agreement between the General Contractor and the

Will all sub-contractors be required to carry

general liability insurance?

insured?

	the extent of the renovations ling any planned structural ns):		
Name Signature		Date Date	