



STUDENT HOUSING SUPPLEMENTAL APPLICATION

Inspection Required of all Student Housing Locations

- * Does the insured or insured location(s) have any affiliation with a university or school? (Y/N) _____
- * Property Manager/Owner has 5 yrs experience in renting to Students? (Y/N) _____
- * Is there an employee screening process? (Y/N) _____
- * How many students occupy building? _____

Bldg1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

How many bedrooms per building?

Bldg1	2	3	4	<u>5</u>	6	7	8	9	10	11	12	13	<u>14</u>	15

- * Are student rentals restricted to upper classmen? (Y/N) _____
(Soph., Jr., Sr., Graduate students)
- * If there are freshmen residing at the premises, what percentage? _____
- * Any students in non-standard bedrooms? (Y/N) _____
(halls, common areas, attics, basements, other areas without doors)
- * Are there more than 8 students per unit? (Y/N) _____
- * Eviction rate less than 5% (Y/N) _____
- * Any building greater than 8 stories? (Y/N) _____
- * Do all units have smoke detectors? (Y/N) _____
- * Do all units have carbon monoxide detectors? (Y/N) _____
- * Any building with balconies above 2nd floor or above 20ft. from ground? (Y/N) _____
- * Any working fireplaces or wood burning stoves? (Y/N) _____
- * Any fire pits on grounds? (Y/N) _____
- * Are cooking grills allowed on porches/decks or within 10 ft. of building? (Y/N) _____
- * Does property manager ever sponsor events that serve alcohol? (Y/N) _____
- * Are trips sponsored or transportation provided by property manager? (Y/N) _____
- * Is there a screening process for students? (Y/N) _____
- * Does student or parent sign the lease?
 - Student? (Y/N) _____
 - Parent? (Y/N) _____
 - Both? (Y/N) _____



COPY OF LEASE REQUIRED

- * Are leases joint & severable for students under 21 years of age? (Y/N) _____
- * Does lease have any special provisions? (Y/N) _____
If yes, explain _____
- * Are there "House Rules" established? (Y/N) _____
Posted? (Y/N) _____
- * Is there a "Zero Tolerance" policy for drug/alcohol violations? (Y/N) _____

General Security

- * Do residents have rooftop access? (Y/N) _____
- * Is there controlled access to the building? (Y/N) _____
- * Are all exterior doors locked? (Y/N) _____
- * Is building security armed? (Y/N) _____
- * Security Cameras? (Y/N) _____
Are they monitored? (Y/N) _____
Inside? (Y/N) _____
Outside? (Y/N) _____
- * Is there outdoor lighting? (Y/N) _____

Garage Operations (if applicable)

- * Controlled Access in garage? (Y/N) _____
- * Open Parking? (Y/N) _____

Recreational Facilities

- * Any ponds/lakes? (Y/N) _____
- * Any docks or piers? (Y/N) _____
- * Any tennis courts?(Y/N) _____
- * Any basketball courts? (Y/N) _____
- * Other facilities? (Y/N) _____
Describe _____
- * Are rules posted at every facility? (Y/N) _____

Loss Information

- * Facilities with drug related loss history? (Y/N) _____
- * Facilities with history of violent crimes? (Y/N) _____

Named Insured _____

 Insured Signature Date Agent Signature Date