

RENTED DWELLING QUESTIONNAIRE

Policy/Application Number : _____ Insured : _____
Broker : _____ Date : _____

This form is to be completed for each rental property insured. A recognized Home Evaluator must be completed.

DWELLING ADDRESS : _____

OCCUPANCY

Single Family Unit ___ Two Family Unit ___ Three Family Unit ___ Other _____

Has the dwelling been modified to more than double the original occupancy? Yes No ___

Do you have a tenant renting the main floor? Yes ___ No ___ Do you have a tenant in the basement? Yes ___ No ___

Does each unit have smoke detectors? Yes ___ No Is there a fire alarm? Yes ___ No ___

Does each unit have a separate entrance? Yes ___ No

Does each unit have a separate electrical panel? Yes ___ No ___

Do any of the units share cooking or washroom facilities? Yes No ___

Are all the units in the home occupied? Yes ___ No If no, explain: _____

(If more than half of the units are unoccupied or vacant, please refer prior to binding)

Is the property vacant? Yes No ___ If yes, how long? ___ Is the property for sale? Yes No ___

What are future plans for the property? _____

OCCUPANTS

How many people occupy each unit? _____

Are all of the occupants in each unit members of the same family? Yes ___ No ___ If no, are there more than 2 unrelated individuals in a unit? Yes ___ No

What is the duration of the lease or rental agreement? Annual ___ Monthly None signed

Does the lease require the tenants to carry liability insurance? Yes ___ No

GENERAL INFORMATION

Please provide policy details for any other rental properties owned by the insured

Does the insured live within 100km of the rental property? Yes ___ No

Who is responsible for the maintenance of the property? Insured ___ Tenant ___ Mgmt Co. ___

Is the property visited monthly by insured, or Management Company? Yes ___ No

Is an internal inspection done at least twice a year? Yes ___ No

How long has the insured owned this property? _____

FOR THE BROKER:

Have you seen the dwelling? Yes ___ No ___

Have you seen the interior of the dwelling? Yes ___ No ___

Broker Signature _____

Please Note:

- If any "grey boxes" are checked, please refer to Underwriting prior to binding.
- Please provide two current photos of the house, from two different angles
- This is a supplement to our application.