



APARTMENT QUESTIONNAIRE

3815 TecPort Drive, Suite 200 • Harrisburg, PA 17111 • 800.745.4555

Quote/Policy #:	Agency Name:	Agency Code:
APPLICANT INFORMATION		
Applicant's Name:		
Mailing Address:		
Phone #:		
Is this new business to your agency: Yes No		
SECTION 1: ACCOUNT INFORMATION PLEASE COMPLETE A SEPARATE QUESTIONNAIRE FOR EACH LOCATION		
Affordable/Subsidized Housing: Yes No	If Yes: Public Housing Section 8 Section 42	
Student Housing: Yes No	Seasonal Property: Yes No	
% Undergraduates: % Graduates:		
Boarding House: Yes No	Short Term Occupancies: Yes No	
Senior Independent Living (No services provided and ambulatory):		Yes No
Assisted Living (Services provided and/or non-ambulatory):		Yes No
SECTION 2: BUILDING INFORMATION		
Year Built:	# Units:	# Stories:
Square Footage:	Percent Occupied:	Construction Type:
Year of most recent building updates:		
Roof _____	Electrical _____	Plumbing _____ HVAC _____
Has the property undergone a "Gut to Studs" Renovation: Yes No If so, when: _____		
THE FOLLOWING QUESTIONS APPLY TO ALL PROPERTIES CONTEMPLATED FOR THIS POLICY		
	YES	NO
Has the building been converted from prior occupancy? If so, describe:		
Are any buildings currently under construction?		
Is there any Aluminum Wiring?		
If yes, has it been remediated? When: _____		
What Method: Pigtailed COPALUM crimp Alumiconn CO/ALR Devices		
Is there Knob and Tube Wiring?		
Are circuits protected by circuit breakers?		
Service Amps?		
Are there any Federal Pacific breaker panels?		
Multi-Building Complexes: Is there a single building serving as Centralized Hub for Utilities/Mechanical		
Is there any Polybutylene Piping?		
Are there exterior utility closets?		
Do you have catch basins under water heaters or washing machines?		
Do you have wood burning fire places or woodstoves?		
Do you have wood shake shingles?		
Is the building listed on the National Register of Historic Places or in a Historic District?		
BUILDING MAINTENANCE		
Is Property Maintained By:	Insured Subcontracted to property management firm	Other
Are certs and additional insured status required of all subcontractors?		
Is there a 24/7 Contact for emergencies?		
Are grills permitted on decks or balconies?		
Charcoal:	Gas:	Both:



There's more for you at Millers.™

APARTMENT QUESTIONNAIRE

Is smoking permitted in the building or on balconies?	Yes	No
Is there natural Mulch around the perimeter of the building?	Yes	No
Who performs the snow removal?	Insured	Contractor
Are Snow Removal Logs Kept: Yes No	Is additional insured status required: Yes No	
Is there a written winterization program in place:	Yes	No
Is heat maintained to at least 60 degrees in all areas of the building:	Yes	No
Does the building have heated sidewalks:	Yes	No
Section 4: Management		
Has the insured owned this location for 3 or more years:	Yes	No
How many years of property ownership or property management experience does the insured have: _____		
Is there a written lease in place with all tenants: Yes No	Annual: Yes No	
How is tenant screening conducted:		
Credit Check Interview Background Check: Employment Check: Referral: None:		
Are tenants required to carry liability insurance? Yes No	What limits: _____	
Is there a procedure to monitor compliance with insurance requirements:	Yes	No
Are dogs permitted: Yes No		
If so, are they limited by size or breed (please explain): _____		
Section 5: Fire and Life Safety		
Are fire extinguishers in all units and common areas:	Yes	No
Smoke Detectors:		
Location: Units Common Areas Both		
Type: Std Battery Lithium Battery Hardwired		
If other than hardwire, is there a formal battery replacement program in place?	Yes	No
CO Detectors in all units and by all fossil fuel burning equipment:	Yes	No
Fire Alarm: Local Central Station Manual Automatic		
Sprinkler System: Yes No	Classification: NFPA 13 NFPA 13R	
Areas of Coverage: Entire Building Units Common Areas Attic	Basement Garage Trash Chutes Storage	
If applicable, are sprinkler pipes in attics either dry or properly insulated:	Yes	No
Standpipe: Yes No	Fire Walls: Yes No	If so, # of units per division: _____
Parapets: Yes No	If so, # of units between parapets: _____	
Means of Egress:	Yes	No
Two Means of Egress from all units?		
Enclosed 2 Hour Fire Rated Stairways?		
Self-Closing Doors in Stairways?		
Illuminated Exit Signs with Battery Backup?		
Emergency Lighting?		



There's more for you at Millers.™

APARTMENT QUESTIONNAIRE

Swimming Pool:		
Lifeguard on Duty:		
Are SWIM AT YOUR OWN RISK signs posted?		
Are pool depths marked in and around pool?		
Fenced/Enclosed with self-locking door or gate?		
Any slides or diving boards?		
Security:		
Is there a security system?		
Are all units equipped with a deadbolt?		
Are Security Guards used?		
Are they armed?		
Are they: Employees Subcontractors		
If subcontractors, are certs and additional insured status obtained?		
SIGNATURES		
Any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent act which is a crime and subjects such person to criminal and civil penalties.		
Insured Name: _____	Signature: _____	Date: _____
Agent Name: _____	Signature: _____	Date: _____

Submission Requirements:

- Currently Values 3 Year Loss Runs Plus Current
- Photos (Front and Rear)
- Plot Plan (If multiple buildings at a single location)
- Statement Values