

**MIXED USE HABITATIONAL SUPPLEMENTAL**

Location #	Effective Date:				
Full Ownership Name:					
Mailing Address:					
City, State, Zip:					
Location Name:					
Location Address:					
City, State, Zip:					
Inspection Contact Name:				Phone Number:	
<b>Coverages:</b>					
Property: <input type="checkbox"/>	General Liability: <input type="checkbox"/>	Umbrella: <input type="checkbox"/>	Equipment Breakdown : <input type="checkbox"/>		
<b>Limits:</b>					
Building:	Contents:	Gross Potential Rents:	Total Insured Value:		
\$	\$	\$	\$		
<i>(Gross Potential Rents on office and retail space to be shown separately in below section.)</i>					
<b>Underwriting:</b> Update information must be provided for buildings over 15 years old.					
Year built	Occupied	%	% Assisted Living	Year Updated	
Bldg Const.	Subsidized	%	# of Pools	Gross Sq Ft	
Roof Const.	Senior Housing	%	# of Units	Net Leasable Sq Ft	
Wiring Type	Student Housing	%	Sprinklered	Security Patrol?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Wiring Update Year	Roof Update Year		Plumbing Update Year	HVAC Update Year	
# of Stories (Including Basement)			County:		
# of Buildings (including all except carports)			Protection Class:		
Commercial Exposure? Yes <input type="checkbox"/> No <input type="checkbox"/>			Commercial Occupancy Type:		
If Condominiums or Townhouses, number of owner occupied units:			Number of rented units:		
	<b>Y</b>	<b>N</b>		<b>Y</b>	<b>N</b>
Property Under Renovation	<input type="checkbox"/>	<input type="checkbox"/>	Horizontal Railings	<input type="checkbox"/>	<input type="checkbox"/>
Graffiti Present	<input type="checkbox"/>	<input type="checkbox"/>	Any spacing greater than 4"?	<input type="checkbox"/>	<input type="checkbox"/>
Deferred Maintenance	<input type="checkbox"/>	<input type="checkbox"/>	Any Fence, balcony or railing other than metal?	<input type="checkbox"/>	<input type="checkbox"/>
5' Pool Fence	<input type="checkbox"/>	<input type="checkbox"/>	Circuit Breakers	<input type="checkbox"/>	<input type="checkbox"/>
Self-locking pool gate	<input type="checkbox"/>	<input type="checkbox"/>	Fuses Present	<input type="checkbox"/>	<input type="checkbox"/>
Diving board	<input type="checkbox"/>	<input type="checkbox"/>	Smoke Detectors	<input type="checkbox"/>	<input type="checkbox"/>
Chain Link fence	<input type="checkbox"/>	<input type="checkbox"/>	Peep Holes	<input type="checkbox"/>	<input type="checkbox"/>
Depth Markers	<input type="checkbox"/>	<input type="checkbox"/>	Deadbolts	<input type="checkbox"/>	<input type="checkbox"/>
Bars on Windows	<input type="checkbox"/>	<input type="checkbox"/>	Panic Release on bars	<input type="checkbox"/>	<input type="checkbox"/>
Prospective Tenant Screening Procedures:			Is the property gated? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Other recreation facilities (describe):					
Lender <input type="checkbox"/>			Additional Insured <input type="checkbox"/>		
Name:					
Address:					
Loan Number:			Contact Name:		

**\*Wood shake roofs and aluminum wiring are not acceptable.**