

GENERAL RULES

- BINDING AUTHORITY:** For coverage to begin as requested, the application must be mailed within 72 hours of the effective date of coverage. Otherwise, coverage is bound at 12:01 a.m. the day of the postmark. No coverage may be increased within 72 hours of the announcement of an impending disaster, i.e. hurricane, tropical storm, volcanic eruption, earthquake, flood, mudslide, brushfire, etc.
Earthquake: If an earthquake occurs generating a reading of 5.0 or greater on the Richter Scale, new business policies and increased coverage request on in-force business policies will be restricted on the day of the earthquake and for a 3 day period following the earthquake. Any aftershock readings of 5.0 or greater will be considered a new earthquake. The restrictions will apply for risks located within 150 miles of the epicenter.
Wildfire: No new policies, binders or increases in coverage will be accepted when a wildfire is within 25 miles of the dwelling.
- OCCUPANCY:** Available for vacant dwellings and vacant mobile homes.
- POLICY TERM:** All policies will be written for a 12 month term.
- MINIMUM PREMIUMS:** A minimum written premium of \$100 will apply.
- POLICY FORM:** ISO DP-1 (DP 00 01 12 02)
- LIMITS:** Property limits are available from \$15,000 to \$500,000.
- APPLICATION:** The application must be completed in full and signed by the applicant.
- VALUATION:** Dwellings must be insured for 100% of their actual cash value.
- WHOLE DOLLAR PREMIUM RULE:** Each coverage premium will be rounded to the nearest whole dollar. For this purpose, an amount of fifty (50) cents or more will be rounded to the next whole dollar.
- POLICY TRANSFER OR ASSIGNMENTS:** Transfer or assignments are not available. New applications are required.
- UNDERWRITING REPORTS:** A C.L.U.E. Property report will be run on all risks. The result of this report may impact the acceptability of the risk.
- POLICY FEE:** A \$20 Expense Constant will be assessed on all new and renewal business. This policy fee is fully earned.
- PREMIUM CALCULATIONS:** The Discount percentages (Example: 3%) will be totaled. The total will be applied to the BASE PREMIUM (Coverages A & B). This is the subtotal. Add optional coverage premiums to this subtotal for your final premium.
- PHOTOS:** All dwellings must have 2 photos clearly showing the front and back of the dwelling attached to the application.

TERRITORIAL DEFINITIONS

Territory A: Island, King, Kitsap, Pierce

Territory B: Adams, Asotin, Benton, Chelan, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Kittitas, Klickitat, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens, Walla Walla, Whitman, Yakima

Territory C: Clallam, Clark, Cowlitz, Grays Harbor, Jefferson, Lewis, Pacific, Whatcom, San Juan, Skagit, Skamania, Snohomish, Thurston, Mason, Wahkiakum

UNACCEPTABLE RISKS – DO NOT BIND, DO NOT SUBMIT

Any "Yes" response makes the risk unacceptable and it cannot be written!

- | | Yes | No | | Yes | No |
|---|--------------------------|--------------------------|---|--------------------------|--------------------------|
| 1. Has the applicant been convicted of arson or insurance fraud?..... | <input type="checkbox"/> | <input type="checkbox"/> | 11. Does the dwelling have a brush clearance of less than 100 feet?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does the dwelling have any existing structural damage?..... | <input type="checkbox"/> | <input type="checkbox"/> | 12. Is the dwelling a row home, dome home, log home, straw built home or condominium ? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is the dwelling in foreclosure?..... | <input type="checkbox"/> | <input type="checkbox"/> | 13. Does the dwelling have more than 2 lien holders?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Does the dwelling have more than 4 individual family units?..... | <input type="checkbox"/> | <input type="checkbox"/> | 14. Does the dwelling have childcare, homecare, lodging, auto repair, chemical processing or any business pursuits being conducted on the premises? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is the dwelling equipped with a liquid fuel-powered space heater or heat-reclaiming device?..... | <input type="checkbox"/> | <input type="checkbox"/> | The next six questions are applicable only if dwelling is going to be renovated. | | |
| 6. Are there other structures/garages on the premises that have a wood/coal/pellet-burning device?..... | <input type="checkbox"/> | <input type="checkbox"/> | 15. Is this new construction from the ground up? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Does the dwelling have knob and tube wiring or electrical service with less than 100 amps?..... | <input type="checkbox"/> | <input type="checkbox"/> | 16. Will any work be done to the structural load bearing members of the existing dwelling? .. | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Does the home have Exterior Insulation Finish System (EIFS) siding?..... | <input type="checkbox"/> | <input type="checkbox"/> | 17. Does any demolition work need to be done prior to construction?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Is the dwelling or other structures used to store flammables or explosive materials?... | <input type="checkbox"/> | <input type="checkbox"/> | 18. Does the insured/contractor have less than 1 year of experience in conducting renovation projects?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is the dwelling next to any burned out or abandoned building?..... | <input type="checkbox"/> | <input type="checkbox"/> | 19. Is the dwelling NOT completely secured?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | 20. Is the risk a non-residential dwelling?..... | <input type="checkbox"/> | <input type="checkbox"/> |

SUBMIT RISKS TO GENERAL AGENT – DO NOT BIND

Any "Yes" response must be explained below and submitted unbound!

- | | Yes | No | | Yes | No |
|---|--------------------------|--------------------------|--|--------------------------|--------------------------|
| 1. Has the applicant had 2 or more property losses (paid or unpaid) in the past 36 months or any single fire, theft, vandalism, liability or flood loss in the past 36 months? (If yes, give date of loss; describe the loss and the amount paid to repair the damage.) | <input type="checkbox"/> | <input type="checkbox"/> | 12. Does the applicant own, keep, or shelter any Akita, Anatolian Shepherd, Chow, Doberman, Pit Bull, Presa Canario, Rottweiler, Wolf or Wolf hybrid, any mix of these breeds with any other breed, whether listed or not, any animal with a previous bite history, or any non-domestic animal at the premises? (Risk may be written with no liability coverage) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has the applicant had a homeowners/dwelling policy cancelled or non-renewed for underwriting reasons (except home age or vacancy) during the past 36 months?..... | <input type="checkbox"/> | <input type="checkbox"/> | 13. Is the dwelling attached to, occupied as or converted from a commercial risk? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Has the applicant filed for bankruptcy in the past 36 months? | <input type="checkbox"/> | <input type="checkbox"/> | 14. Does the dwelling have an open foundation or is it built on stilts, posts or piers? Photos must be included. | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Has the applicant been 30 days past due on mortgage payments in the last 12 months ? | <input type="checkbox"/> | <input type="checkbox"/> | 15. Is the dwelling equipped with steps or porches, over 2 feet in height that do not have a railing? Photos must be included. | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is the applicant unemployed? (Retirees with guaranteed income and disabled persons with a consistent income are considered employ ed) | <input type="checkbox"/> | <input type="checkbox"/> | 16. Is the dwelling without permanently installed steps at all entrances? Photos must be included. | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is the dwelling without permanently installed water, electricity, and sewage utility services? | <input type="checkbox"/> | <input type="checkbox"/> | 17. Is the dwelling within 1,500 feet of water (river, creek or ocean) or homes located on an island or in a Special Flood Hazard Area? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Is the dwelling's primary source of heat is a wood/coal/pellet burning device? | <input type="checkbox"/> | <input type="checkbox"/> | 18. Does the dwelling have multiple horses, livestock or farm animals on the premises? .. | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Is the heat turned off or not maintained in the dwelling? | <input type="checkbox"/> | <input type="checkbox"/> | 19. Does the dwelling have a dock, pier or boathouse on the premises? Photos must be included. | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Does the dwelling have un-repaired damage or existing non-structural damage? | <input type="checkbox"/> | <input type="checkbox"/> | 20. Is the dwelling on a premises with 5 or more acres? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Has the dwelling been uninsured for more than 30 days immediately prior to the requested effective date? (Does not apply to a new purchase) | <input type="checkbox"/> | <input type="checkbox"/> | 21. Does the dwelling have farming or business activities conducted on the premises? | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Does the premises have a swimming pool or spa that does not have a four-foot fence with a self-latching gate, motorized pool cover, or other comparable safety device that is securely fastened to the perimeter of the pool/spa thus rendering it inaccessible. (Risk can be written with Liability if the Swimming Pool/Spa Liability Exclusion is attached.) | <input type="checkbox"/> | <input type="checkbox"/> | 22. Do the other structures exceed 30% of the insured value of the home, or \$25,000, whichever is greater? | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | 23. Is the dwelling under construction or major renovation?..... | <input type="checkbox"/> | <input type="checkbox"/> |

Explain "Yes" answers _____



VACANT / UNOCCUPIED / RENOVATION DWELLING APPLICATION (LOB 56)

PHOTOS OF FRONT AND BACK OF DWELLING MUST BE ATTACHED.

APPLICANT		PRODUCER	
Name		Agency Name:	Agent #:
Address		Agency Phone:	Agent Fax:
City	State	Zip	
County	Phone No.	REQUEST POLICY TERM	
Occupation	Employer (If self-employed, list self)	From	To
Social Security #	DOB	Policy Term: 12 Months	
Co-applicant's Name	DOB	Time	
Co-applicant's Social Security #	DOB	AM <input type="checkbox"/> PM <input type="checkbox"/>	
Co-applicant's Occupation	Co-applicant's Employer (If self-employed, list self)	LOCATION	
Add'l Insured		Address, if different than above (include city, state, zip and county)	
Address			
City	State	Zip	

BINDING COVERAGE: For coverage to begin as requested, the application must be mailed within 72 hours of the effective date of coverage. Otherwise, coverage is bound at 12:01 a.m. the day of the postmark.

BILLING / ACCOUNTING INFORMATION	
BILL TO: <input type="checkbox"/> Insured <input type="checkbox"/> Lienholder Check # _____ Check Amt \$ _____	
*PAYMENT PLANS: If the insured desires to pay their premium on an installment basis, the Company will allow a 2-payment or 4-payment option to be selected. <input type="checkbox"/> 1-Pay, 100% payment, plus any applicable taxes and fees <input type="checkbox"/> 4-Pay, 25% down, plus any applicable taxes and fees * Each installment includes a \$6 fully earned service charge <input type="checkbox"/> 2-Pay, 50% down, plus any applicable taxes and fees	

MORTGAGEE			
Name		Loan #	
Address		Address	
City	State	Zip	
City	State	Zip	

GENERAL INFORMATION													
Territory	Year Built	Square Footage	Protection Class	Feet to Fire Hydrant	Miles to Fire Dept.	# of Families	Construction			# of Stories	Year Purchased	Purchase Price	Actual Cash Value (Excluding Land)
							<input type="checkbox"/> Frame	<input type="checkbox"/> Masonry	<input type="checkbox"/> Masonry Veneer			\$	\$
Type of Wiring: <input type="checkbox"/> Circuit Breakers <input type="checkbox"/> Fuses <input type="checkbox"/> Fuses & Circuit Breakers Date Of Last Update: _____ <input type="checkbox"/> Full Update <input type="checkbox"/> Partial Update If Partial, to what extent: _____ Type of Heating: _____ Type of Roofing: _____ Date Of Last Update: _____ <input type="checkbox"/> Full Update <input type="checkbox"/> Partial Update If Partial, to what extent: _____ Describe Unattached Structures: _____													

MUST COMPLETE THE FOLLOWING	
HOW LONG HAS THE DWELLING BEEN VACANT? _____	
PRIOR INSURANCE: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> New Purchase	
Prior Company: _____	
Expiration Date: _____	
ANIMALS ON PREMISES: <input type="checkbox"/> Yes <input type="checkbox"/> No Animal Type: _____	
Breed of Dog: _____	
DISCOUNT / SURCHARGE SECTION	
Deductibles:	\$1,000 Deductible - 7% <input type="checkbox"/>
\$500 Base Deductible	\$2,500 Deductible - 14% <input type="checkbox"/>
	\$5,000 Deductible - 20% <input type="checkbox"/>
TOTAL: _____	

POLICY INFORMATION		
COVERAGES	LIMITS	PREMIUM
Dwelling	\$	\$
Total Amount of Other Structures	\$	\$
BASE PREMIUM:		\$
DISCOUNT/SURCHARGE PERCENTAGE: (See small shaded section to the left.) %		
DISCOUNT/SURCHARGE AMOUNT: (BASE PREMIUM multiplied by DISCOUNT/SURCHARGE %)		\$
SUBTOTAL: (BASE PREMIUM plus DISCOUNT/SURCHARGE AMOUNT)		\$
Premises Liability	\$	\$
Medical Payments to Others	\$	\$
Deductible	\$	\$
EXPENSE CONSTANT:		\$ 20.00
Minimum Written Premium \$100.	TOTAL PREMIUM: \$	

SPECIFIC BREED ANIMAL EXCLUSION NOTICE: I understand the Specific Breed Animal Exclusion will be attached to my policy and that bodily injury, property damage or any other loss or expense arising out of any occurrence involving any of the following types of animals and/or breeds of dogs will not be covered: Any animal with a previous bite history, snakes, monkeys or ostriches; Breeds of dogs include Akita, Anatolian Shepard, Chow, Doberman, Pit Bull, Presa Canario, Rottweiler, Wolf or Wolf Hybrid.

FRAUD WARNING: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, or denial of insurance benefits.

IMPORTANT NOTICE: Personal Information about you, including information from a credit or other investigative report, may be collected from persons other than you in connection with this application for insurance and subsequent amendments and renewals. Such information as well as other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties without your authorization. Credit scoring information may be used to determine either your eligibility for insurance or the premium you will be charged. We may use a third party in connection with the development of your score. You have the right to review your personal information in our files and can request correction of any inaccuracies. A more detailed description of your rights and our practices regarding such information will be issued with your policy. This notice is given in compliance with the Federal Credit Reporting Act.

X _____ Date _____ X _____ Date _____
(Signature of Applicant) (Signature of Producer)