

RENTED DWELLING QUESTIONNAIRE

Policy Number: Broker: _____ Date: _____
 Insured: _____ Broker Code: _____
 Place of Residence: _____
 Risk Address: _____

GENERAL INFORMATION

Number of rental units: _____ Are any of the units vacant? Yes No If Yes, indicate #:
 Are there working smoke detectors in each rental unit? Yes No _____
 Does each unit have a separate electrical panel? Yes No
 Does each unit have a separate entrance? Yes No
 Do any of the units share any common areas i.e. kitchen, washroom? Yes No
 Is the property being rezoned for redevelopment? Yes No
 What is the duration of the lease or rental agreement? Annual Monthly None
 Does the lease or rental agreement require the tenants to carry personal liability insurance?
 Yes No

MAINTENANCE

Who is responsible for dwelling maintenance?
 Is this an absentee landlord? Yes No
 Is there a property manager? Yes No If Yes, provide details:
 Name of property manager: _____
 Address: _____ Telephone: _____
 How often is property inspected? _____ Date of last inspection: _____

ADDITIONAL COMMENTS

**RECENT PHOTOGRAPHS OF FRONT & BACK OF THE DWELLING
MUST ACCOMPANY QUESTIONNAIRE**