

RENTED DWELLING (HVH ONLY) QUESTIONNAIRE

Name of Applicant(s): _____

Does the insured live in the dwelling? Yes No

If no, please advise if this is an absentee landlord: Yes No

Is there a property manager in place? Yes No

Who is responsible for the maintenance of the dwelling, property & equipment?

Is the dwelling inspected inside & out a minimum of once every 3 months? Yes No

Whom is performing the inspections? _____

Please provide details of operators prior experience with rental properties:

Advise the number of self-contained units: _____

Confirm all units are self-contained: Yes No

Are there more than 2 unrelated tenants per unit? Yes No

Are there any students or government subsidized tenants: Yes No

If yes, please provide details & advise year of schooling (ex. 2nd year of University):

Are hot plates, smoking or space heaters permitted within the dwelling/units? Yes No

Is there a rental agreement in place with the tenants? Yes No

If yes, please advise the term (monthly, annual, etc): _____

If there are currently tenants in place, please advise how long they have occupied the dwelling:

Are tenants required to carry separate insurance? Yes No

IMPORTANT - PLEASE READ CAREFULLY:

It is understood and agreed that the completion of this application shall not be binding either to the proposed insured or to the company until accepted by the company or companies underwriting application.

This Questionnaire is attached to and forms part of the policy. Please ensure that the application is completed in full, signed, dated & witnessed warranting same.

Applicant's Signature

Date