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LESSORS RISK SUPPLEMENTAL QUESTIONNAIRE

Clear Form

APPLICANT'S NAME
LOCATION

A. GENERAL INFORMATION

1. DESCRIBE THE COMMERCIAL OCCUPANCIES. (If more than five, please attach a supplemental list)

TENANT NAME	DESCRIPTION OF OCCUPANCY	% / AREA

2. PERCENT VACANT: % **3.** YEARS EXPERIENCE AS COMMERCIAL PROPERTY OWNER

4. IS A PROFESSIONAL PROPERTY MANAGER INVOLVED? ☐ YES ☐ NO

5. ANY HABITATIONAL EXPOSURE? ☐ YES ☐ NO IF YES, HOW MANY UNITS?

6. DOES APPLICANT HAVE ANY TAX LIENS, PAST DUE ACCOUNTS, OR PRIOR / PENDING BANKRUPTCY?
☐ YES ☐ NO

IF YES, EXPLAIN:

7. ANY OUTSTANDING INSURANCE COMPANY LOSS CONTROL RECOMMENDATIONS? ☐ YES ☐ NO

8. FIRE DEPARTMENT LAST INSPECTION ANY OUTSTANDING RECOMMENDATIONS? ☐ YES ☐ NO

9. PLEASE DESCRIBE ANY UNRESOLVED RECOMMENDATIONS FROM #7 OR #8 ABOVE:

B. PROPERTY

10. WHEN WAS THE LAST TIME THE FOLLOWING WERE UPDATED BY A QUALIFIED PERSON?

	DATE UPDATED	DESCRIBE UPDATES
ROOF		
ELECTRIC		
PLUMBING		
HEATING		

Clear Form

11. BUILDING ELECTRICAL

KNOB & TUBE WIRING? ☐ YES ☐ NO

IF YES, ANY UPDATES? DESCRIBE:

ARE KITCHEN, LAUNDRY & BATHROOM EQUIPPED WITH GFI RECEPTACLES? ☐ YES ☐ NO

CIRCUIT BREAKERS? ☐ YES ☐ NO ANY FUSES? ☐ YES ☐ NO

ANY FEDERAL PACIFIC STAB-LOK PANELS? ☐ YES ☐ NO

ANY ZINSCO/GTE-SYLVANIA PANELS? ☐ YES ☐ NO

ALUMINUM WIRING? ☐ YES ☐ NO

IF ALUMINUM, ARE RECEPTACLES & SWITCHES FIXED USING THE COPALUM CRIMP METHOD? ☐ YES ☐ NO

12. DOES EACH TENANT AREA HAVE A FIRE EXTINGUISHER? ☐ YES ☐ NO LAST TAGGED?

13. SMOKE ALARMS IN EACH TENANT AREA? ☐ YES ☐ NO

☐ BATTERY ☐ HARDWIRED *IF BATTERY, LONG LIFE?* ☐ YES ☐ NO

WHO IS RESPONSIBLE FOR CHECKING BATTERIES? ☐ TENANT ☐ OWNER

HOW OFTEN CHECKED?

14. CARBON MONOXIDE DETECTORS IN EACH TENANT SPACE? ☐ YES ☐ NO

☐ BATTERY ☐ HARDWIRED *IF BATTERY, LONG LIFE?* ☐ YES ☐ NO

WHO IS RESPONSIBLE FOR CHECKING BATTERIES? ☐ TENANT ☐ OWNER

HOW OFTEN CHECKED?

15. EMERGENCY EXITS

POSTED EMERGENCY EXIT SIGNAGE? ☐ YES ☐ NO

DO EMERGENCY EXITS OPEN WITHOUT A KEY? ☐ YES ☐ NO

16. IS THE BUILDING FULLY SPRINKLERED? ☐ YES ☐ NO

IF PARTIALLY SPRINKLERED, WHAT AREAS?

17. WHAT IS THE PRIMARY SOURCE OF HEAT FOR THE BUILDING?

☐ BOILER ☐ GAS/OIL CENTRAL HEAT ☐ ELECTRIC BASEBOARD ☐ OTHER

18. IS SMOKING ALLOWED INSIDE BUILDING? ☐ YES ☐ NO

IF YES, IN WHAT AREAS?

ARE SMOKING RECEPTACLES PROVIDED? ☐ YES ☐ NO

19. *IF RESTAURANT OPERATIONS, PLEASE COMPLETE THE FOLLOWING SECTION:*

FIRE PROTECTION:

MEET NFPA 96 STANDARDS? ☐ YES ☐ NO	MEET UL 300 STANDARDS? ☐ YES ☐ NO

DOES THE AUTOMATIC EXTINGUISHING SYSTEM PROTECT **ALL:**

COOKING SURFACES ☐ YES ☐ NO	EXHAUST DUCTWORK ☐ YES ☐ NO
DEEP FAT FRYERS ☐ YES ☐ NO	HOODS ☐ YES ☐ NO

DO ALL DEEP FAT FRYERS HAVE HIGH LIMIT SWITCHES? ☐ YES ☐ NO

FIRE PROTECTION continued:

IS A WET CHEMICAL FIRE SUPPRESSION SYSTEM USED?	☐ YES ☐ NO
IS THE EXTINGUISHING SYSTEM EQUIPPED WITH AUTOMATIC FUEL SHUTOFF AND EASILY ACCESSIBLE MANUAL RELEASE CONTROLS: ☐ YES ☐ NO	
LIST THE BRAND NAME	AGE OF THE SYSTEM?
IS THERE AN INSPECTION / MAINTENANCE AGREEMENT FOR THE SYSTEM?	☐ YES ☐ NO
CONTRACTOR	INSPECTION FREQUENCY
IS THERE A MAINTENANCE AGREEMENT TO CLEAN THE HOOD AND DUCTWORK?	☐ YES ☐ NO
CONTRACTOR	CLEANING FREQUENCY
ARE THE HOODS, DUCTS, FILTERS, DEEP-FAT FRYERS AND FANS REGULARY CLEANED BY INSURED?	☐ YES ☐ NO

C. LIABILITY

20. DO YOU USE A STANDARD WRITTEN LEASE AGREEMENTS? ☐ YES ☐ NO

ATTORNEY NAME / LANDLORD TRADE ASSOCIATION THAT PREPARED LEASE?

21. DOES LEASE REQUIRE (AND FOR THE TENANT TO PROVIDE A CERTIFICATE OF INSURANCE) FOR GENERAL LIABILITY INSURANCE WITH LIMITS OF AT LEAST $1 MILLION PER OCURRENCE AND $2 MILLION GENERAL AGGREGATE? ☐ YES ☐ NO

22. DOES LEASE REQUIRE (AND FOR THE TENANT TO PROVIDE A CERTIFICATE OF INSURANCE) FOR RENTERS INSURANCE AND NAME THE PROPERTY OWNER AS AN ADDITIONAL INSURED FOR LIABILITY? ☐ YES ☐ NO

23. IF YOU HAVE TENANTS WHO SERVE ALCOHOL, DOES THE LEASE REQUIRE (AND FOR THE TENANT TO PROVIDE A CERTIFICATE OF INSURANCE) FOR LIQUOR LIABILITY OF AT LEAST $1 MILLION EACH COMMON CAUSE? ☐ YES ☐ NO

24. DOES THE LEASE REQUIRE LANDLORD TO NAME THE TENANT AS ADDITIONAL INSURED? ☐ YES ☐ NO

25. DOES THE LEASE REQUIRE TENANT TO NAME LANDLORD AND MANAGER (IF APPLICABLE) AS ADDITIONAL INSURED? ☐ YES ☐ NO

26. WHO IS RESPONSIBLE FOR THE BUILDING MAINTENANCE AS SPECIFIED IN THE LEASE? ☐ TENANT ☐ OWNER

27. DOES LEASE HOLD THE APPLICANT HARMLESS FOR ACTS OF TENANTS? ☐ YES ☐ NO

28. DOES THE LEASE PREVENT SUBROGATION BACK AGAINST THE TENANT FOR AN ACT OF THE TENANT? ☐ YES ☐ NO

29. IS THE LEASE AGREEMENT A "TRIPLE NET LEASE"? ☐ YES ☐ NO

30. DOES THE LEASE ADDRESS WHO IS RESPONSIBLE FOR SMOKE AND CARBON MONOXIDE DETECTORS? ☐ TENANT ☐ OWNER

31. IS PARKING AVAILABLE? ☐ YES ☐ NO

IF YES: *COVERED?* ☐ YES ☐ NO

LIGHTED? ☐ YES ☐ NO

GARAGE WITH AUTOMATIC DOOR? ☐ YES ☐ NO

32. ARE THERE INTERNAL STAIRS ACCESSIBLE TO CUSTOMERS? ☐ YES ☐ NO

IF YES DO STAIRS HAVE:

HANDRAILS? ☐ YES ☐ NO *SLIP RESISTANT TILES?* ☐ YES ☐ NO

ADEQUATE LIGHTING? ☐ YES ☐ NO *EMERGENCY LIGHTING?* ☐ YES ☐ NO

DOES DOOR OPEN OVER STAIRWELL? ☐ YES ☐ NO

LOCKING MECHANISM ON STAIRWELL DOOR(S)? ☐ YES ☐ NO

33. SECURITY CONCERNS:

ADEQUATE LIGHTING OF PARK LOT AND COMMON AREAS? ☐ YES ☐ NO

EMERGENCY LIGHTING? ☐ YES ☐ NO

SECURITY PATROLS? ☐ YES ☐ NO

SECURITY CAMERAS? ☐ YES ☐ NO

34. NUMBER OF POLICE/FIRE RESPONSES IN THE PAST YEAR?

35. HAVE ANY GUESTS OR EMPLOYEES BEEN VICTIMS OF A CRIME ON YOUR PREMISES IN THE PAST YEAR? ☐ YES ☐ NO

IF YES, HOW MANY INCIDENTS?

36. DESCRIBE YOUR SECURITY PROCEDURES:

37. DESCRIBE YOUR SAFETY PROCEDURES:

Applicable in WA: *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 and denial of insurance benefits.*

Applicable in OR: *Any person who knowingly and with intent to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.*

Completion of the application does not bind coverage. The Company's acceptance of the risk is required before coverage may be bound and a policy issued.

The undersigned Producer agrees to be responsible for any earned premiums developed from the binding of this application. Producer has reviewed this application fully with the applicant and, to the best of the producer's ability, is confident that all information given is truthful.

APPLICANT _____ PRODUCER _____

HAS PRODUCER PHYSICALLY INSPECTED PREMISES IN LAST 12 MOS?
☐ YES ☐ NO

SIGNATURE _____ SIGNATURE _____

DATE _____ DATE _____

This form shall be attached to, and made part of, the fully completed Acord application by the applicant.