



See final page for submission directions.

Agency: _____ Contact: _____

Phone: _____ Email: _____

Habitational Supplemental
(Include Acord Application)

Applicant's Name: _____

Mailing Address _____

Physical Address _____

Phone: _____ Fax: _____

Contact (Owner/Manager): _____ Email: _____

Schedule of Locations (attach a separate sheet if necessary):

	Address	City	County	State	Zip
1					
2					
3					
4					

Fire Protection and Security Information

- a. Sprinkler System? YES NO
 - All Units? YES NO
 - Common Areas only? YES NO
- b. Smoke Detectors in each unit? YES NO
 - Hardwire? YES NO
 - Battery? YES NO
 - Hallway leading to bedroom? YES NO
- c. Fire extinguishers? YES NO
 - In each unit? YES NO
 - In common areas? YES NO
- d. Separation between buildings? YES NO
 - Distance between buildings: _____

- e. Is Security Provided? YES NO
 - If yes: Patrol Gated Access Alarm Systems
 - 24-hour security? YES NO
 - Armed YES NO
 - Unarmed YES NO
 - Independent/contracted YES NO
 - Employee - Payroll: _____ YES NO
- f. If gated, is entire complex gated? YES NO
 - How is access obtained? _____
 - Who is given access? _____
- g. If alarm, who monitors system? _____
 - Are alarm systems in every unit? YES NO

Hotel / Motel

- a. Peep holes in each unit door? YES NO
- b. Dead bolts in each unit door? YES NO
- c. Non-slip surface in all tub/shower areas? YES NO

General Information

- a. If there have been any water damage claims within the past 3 years, has the insured taken protective safeguards to ensure this doesn't happen again? YES NO
 - If yes, describe: _____



Habitational Supplemental (continued)

For Applicant: _____

- b. Has applicant received any claims for wrongful eviction in the past 5 years? YES NO
 If yes, how many of these claims were paid? _____
 Provide details: _____
- c. Are any of the applicant's properties subject to rent control laws? YES NO

Recreational Exposures

- a. Swimming Pool(s) YES NO Slides YES NO
 Diving Boards YES NO Underwater lighting YES NO
 If yes, Height: _____
 Steps into shallow end with handrails? YES NO
 Is the pool completely surrounded by building walls or fenced? Height: _____ YES NO
 Are gates or doors opening into the pool area equipped with a self-closing/self-latching device? YES NO
 Are the depth markings clearly visible? YES NO
 Are warning signs and rules posted and clearly visible? YES NO
 Is rescue equipment, including a ring buoy and 12-ft shepherd's crook, available at poolside? YES NO
 Is pool maintained by: Applicant Outside Contractor
 Are lifeguards provided by: Applicant Pool Management Co Other _____

- b. Number of:
- | | |
|----------------------------|--------------------------|
| Playgrounds _____ | Volleyball Courts _____ |
| Basketball Courts _____ | Racquetball Courts _____ |
| Acres of lakes/ponds _____ | Baseball Fields _____ |
| Tennis Courts _____ | Boat Slips _____ |
| Other _____ | describe: _____ |

Renovations and/or Recent Updates (attach separate sheet if necessary)

Type of Update (give year for each location)	Location:	1	2	3	4
Electric					
HVAC					
Plumbing					
Roof					
Other					

Description of Location(s) (attach separate sheet if necessary)

Use alpha codes for Type of Occupancy:

- | | | |
|--------------------------------------|--------------------------------|-----------------------------------|
| A -- Apartment Building | E -- Dwelling (Two Family) | I -- Fraternity or Sorority House |
| B -- Garden Apartments | F -- Dwelling (Three Family) | J -- Motel |
| C -- Apartment (Hotel or Time Share) | G -- Dwelling (Four Family) | K -- Hotel |
| D -- Dwelling / One Family | H -- Boarding or rooming house | L -- Condominium |

Description	Location:	1	2	3	4
Years owned by Insured					
Type of Occupancy (use code from list on previous page)					
Type of construction					
Year Built					
Number of stories					
Number of total units and buildings		~	~	~	~

Submit by fax or email to the regional office that serves your primary location:



West

San Francisco, CA
Morgan Hill, CA
Redondo Beach, CA
Santa Clarita, CA
San Diego, CA

Fax: 415-955-1924
Fax: 408-778-6096
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