

ResortGuard[®]

Resort Condominiums Comprehensive Profile

Please complete this Questionnaire and the separate amenity forms that apply for the exposure activities found at the Resort Condominium indicated.

Account Characteristics

Registered Name of Corporation:
Physical Location:
Web Site Address:
E-mail Address:
Type of Management (check one):
<input type="checkbox"/> On Site Association Employee
<input type="checkbox"/> On Site / Property Management Firm
<input type="checkbox"/> Off Site / Property Management Firm
<input type="checkbox"/> Developer Managed
<input type="checkbox"/> Other:

Contacts for Loss Control Inspection

Location	State	Contact Name	Phone

Demographic Characteristics

Type of Terrain

✓ Check one

High Frequency Risk Zones

- Forest
- Open Grassland
- Desert
- Urban
- Within Incorporated City/Township

- Hurricane / Wind
- Flood - Zone
- Forest Fire
- Earthquake – Zone
- Volcano

Number of Total Building Lots:
Developed:
Undeveloped:

Type of Building Unit	Number	Built	Is Client Responsible to Insure	
Condominium Units			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Townhouse Units			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Apartment Units			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Non-Residential Hotel / Motel Units			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Type of Ownership	<input type="checkbox"/> Time Share		<input type="checkbox"/> Interval Ownership	

Full Time Population:
Seasonal Population:

Type of Association

- Resort
- Retirement
- Residential

Physical Characteristics

Total Acres Common:	acres
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Exterior Recreational Facilities

Number of:
Swimming Pools:
Tennis Courts:
Ponds / Lakes:
Other:

Property Information

Fully Sprinkled	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Partial Sprinkled (Common Areas)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Hard Wired Smoke / Heat Detectors	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Battery Smoke / Heat Detectors	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Monitored Alarm	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Stand Pipes	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is Property Located Within a Fire Protection District	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What is the public protection class?		
Distance To Nearest Fire Station	Miles	
Distance To Closest Hydrant	Feet	
Water Supply:		
Municipal Water	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Private Well	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Lake/River	<input type="checkbox"/> Yes	<input type="checkbox"/> No
For locations in protection class 8 or 9 please describe fire suppression plan:		

Safety Program

Is there a position that oversees a safety program for the operation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Does the safety program include the following:		
Evacuation Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Emergency Response Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Self Inspection Program	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Incident Investigation	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Subcontractor / Concessionaire Controls

Is there a subcontractor control policy in place for selecting and managing subcontracted operations? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are subcontractors required to carry Commercial General Liability coverage at limits of liability to pay potential claims expected from work performed? (minimum limits should \$1,000,000) <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are subcontractors required to place their coverage with an insurance company that has a Best's rating of A or better? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is the resort named as an additional named insured on the subcontractor's liability and / or completed operation insurance policy? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are Hold Harmless clauses signed that hold the resort harmless from damages caused by subcontractors during operational activities and / or completed work? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are records maintained that allow identification of subcontractors used on each project or activity to ensure the ability to identify the sub if a loss occurs? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Services

		Insured	Subcontract	City
Water	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waste Water Treatment	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cable TV	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Security	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Suppression	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trash / Garbage Pickup	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street / Parking Lot	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Snow Removal	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grounds Maintenance	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shuttle Transportation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Services

	Insured	Subcontract	Other
Day Care / Nursery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Real Estate Sales	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newspaper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Landscape / Tree Maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lake Weed Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreation Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Program Special Risks

Please complete applicable questionnaire for each operation checked below:

Aquatics (swimming pools / beaches)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Water Slides / Water parks	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Fitness Center / Spa	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Security / Police	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Restaurant / Liquor	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Golf Course	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Auto/Garage Keepers	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Equestrian Center	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Tennis Courts	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Watercraft / Marina	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Day Care / Nursery	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Concerts / Fairs	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Ice Skating	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Snow Sledding / Tubing	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Snowmobile Tours	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
X-C Skiing	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Guided Backpacking / Hiking Tours	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Shooting Ranges	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Inline Skating / Skateboarding	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Campground	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Community Center / Club House	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Downhill Skiing Application	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, complete MountainGuard
Other:	(please list and complete generic form)		

SUMMARY

All submissions require a completed and signed supplemental application / questionnaire. Prior to consideration by underwriting signatures must be obtained from a company representative.

X _____

Date

Signature