

# 235 INSURANCE

## REAL ESTATE: BUILDING APPLICATION

---

**Named Insured:**

**Location Address**

**Insureds Mailing Address:**

**Insured's Contact**  
*(name, number, + email)*

**Property Manager Contact**  
*(name, number, email)*

**Lender's Loss Payable Interest** *(name/*  
*payee clause, address):*

**Additional Insured(s):**  
*(name, address, source of interest)*

## LOCATION INFORMATION

**Overall interior and exterior condition of property in insured's opinion 1-5**

- 1- Needs significant renovations / builder's risk
- 2- Okay but in need of TLC
- 3- Solid
- 4- Improved, good condition
- 5-Excellent

**Year Purchased:**                      **Total Building  
Square Footage:**                      **Year Built:**

**Construction Type (brick / frame / describe):**                      **Parking Availability (describe):**

**# of stories  
above-ground:**                      **Basement:**                      **Roof type and condition**

**Heating and Air Systems (describe)**                      **Average Monthly Rents:**

**APTs # of units occupied**                      **APTs # of units vacant**                      **Gross Annual Rents**

**Student Housing %:**                      **Senior Housing %:**                      **Subsidized Housing %:**

**History of Updates, please provide year of last improvement:**

**Roof:**                      **Heating:**                      **Electric:**                      **Plumbing:**

**Number of Commercial Units:**

**Commercial Tenants list, including square footage of each tenant:**

## **Additional Hazard Information**

### **Fire Extinguishers**

In hallways  
In living quarters

### **Smoke Detectors**

battery  
hardwired  
both  
Carbon  
Monoxide

### **Location of smoke detectors**

In hallways  
In living quarters

### **Life Safety & Risk Control:**

Emergency Exits marked  
Emergency Exits lighting  
Emergency Lighting interior  
Emergency Lighting exterior  
Enclosed stairwells  
Automatic Sprinkler system  
Central Fire Alarm system  
Central Burglar Alarm system  
Security Cameras  
Elevators  
Interior Second Means of Egress  
Exterior Second Means of Egress  
Aluminum Wiring  
Space Heaters  
Electric baseboard heating  
Fuse Electric  
Proof of insurance obtained for any/all subcontractors?

### **Additional hazard + life safety notes**

**What is outlook of next 12 months at this location? For example, are any improvements planned?**

**Current Insurance  
Carrier**

**Policy expiration date  
and premium**

**Current Insurance  
Amount (Building)**

**Loss experience?**

**Please order four years "LOSS RUNS" from your current broker or carrier; loss runs are a requirement to bind new property insurance.**

**Describe any targets you have regarding insurance coverage dates, amounts of coverage, loss deductible, or other notes for your broker regarding this application:**

---

I acknowledge that these responses were given in good faith and to the best of my knowledge. It is understood that these responses will be used by **235 Insurance, Ltd.** in connection with my insurance application (*admin@235insurance.com*, 312-720-1950).

**NAME**

**TITLE**

**SIGNATURE (please type your name to indicate e-signature)**

**DATE**