



IFG Companies

**HABITATIONAL SUPPLEMENTAL QUESTIONNAIRE**  
(Complete in addition with an ACORD application)

Applicant: \_\_\_\_\_

Location: \_\_\_\_\_

**GENERAL INFORMATION**

- 1) If structure is over 20 years old, please advise when the following updates were made:  
 a) Heating \_\_\_\_\_ b) Electrical \_\_\_\_\_ c) Plumbing \_\_\_\_\_ d) Roof \_\_\_\_\_
- 2) a) Number of rental units \_\_\_\_\_ b) Ave. number of units vacant at any one time \_\_\_\_\_ c) Number of HUD units \_\_\_\_\_  
 d) % rented to students \_\_\_\_\_
- 3) a) Average monthly rent: Studio \_\_\_\_\_; 1 bedroom \_\_\_\_\_; 2 bedrooms \_\_\_\_\_; 3 bedrooms \_\_\_\_\_; b) Are there any daily/hourly rentals \_\_\_\_\_
- 4) Are leases required \_\_\_\_\_, if yes, please advise percentage of: a) 3 Month Leases \_\_\_\_\_ b) 6 Month Leases \_\_\_\_\_  
 \_\_\_\_\_ 12 Month Leases \_\_\_\_\_ Other \_\_\_\_\_

**FIRE / LIFE SAFETY and SECURITY**

	Query	Yes	No	Remarks
1	Does the manager / owner live on the premise	<input type="checkbox"/>	<input type="checkbox"/>	
2	Are there heat and smoke detectors in all rooms	<input type="checkbox"/>	<input type="checkbox"/>	
3	Are all sliding doors equipped with additional locks	<input type="checkbox"/>	<input type="checkbox"/>	
4	Are there dead bolts on all entry doors	<input type="checkbox"/>	<input type="checkbox"/>	
5	Are armed security guards employed	<input type="checkbox"/>	<input type="checkbox"/>	
6	Are any outside security guards employed	<input type="checkbox"/>	<input type="checkbox"/>	
7	Are certificates of insurance required for the outside service	<input type="checkbox"/>	<input type="checkbox"/>	If yes, include copy of certificate
8	Does applicant advertise a safe and secure premise	<input type="checkbox"/>	<input type="checkbox"/>	If yes, include copy of advertisement
9	Are all parking facilities properly lighted	<input type="checkbox"/>	<input type="checkbox"/>	
10	Are there fire division/parapets?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, advise the number of units per division

**RECREATIONAL FACILITIES**

- 1) Describe any Playground Equipment in use ( i.e. types, properly installed, condition, fenced etc. )  
 \_\_\_\_\_
- 2) Describe any Exercise Facilities in use ( i.e. types of equipment, condition, safety requirements etc. )  
 \_\_\_\_\_
- 3) Describe any other recreational facilities available ( i.e. tennis/basketball courts, boating etc. )  
 \_\_\_\_\_
- 4) If any swimming pools, please advise number and complete query  
 \_\_\_\_\_

	Swimming Pool Query	Yes	No	Remarks
1	Is pool area fully fenced with self closing, self latching gate	<input type="checkbox"/>	<input type="checkbox"/>	
2	Are rules posted and pool depth marked	<input type="checkbox"/>	<input type="checkbox"/>	If yes, include copy of rules
3	Is there lifesaving equipment readily available	<input type="checkbox"/>	<input type="checkbox"/>	
4	Are there any slides or diving boards? If yes, describe in remarks	<input type="checkbox"/>	<input type="checkbox"/>	

The applicant, agent and/or broker represents that the above statements are true and that no material facts have been suppressed or misstated.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Producer's Signature: \_\_\_\_\_

Date: \_\_\_\_\_