



## RECREATIONAL EXPOSURES

Indicate if the following are present by checking the box below:

- Aerobics/Fitness Classes or Weight Room  Tours/Shuttle Service  Sauna/Spas  
 Tenant Garage Sales/Flea Market  Hobby Shops or Hobby Classes  Shuffle Board  
 Activities Involving Animals  Horseshoe Court

### Open to public?

- Laundry Facilities  Yes  No  
 Tennis Courts  Yes  No  
 Swimming Pool  Yes  No  
 Playground  Yes  No

Type of surface \_\_\_\_\_

List other activities not mentioned above. \_\_\_\_\_

Is facility used by the public for meetings, weddings, church, etc.?  Yes  No

Any functions or activities where alcoholic beverages are served or permitted?  Yes  No

## SUBCONTRACTED WORK

Explain all "Yes" responses.

Do you subcontract work to others (such as carpentry, security, premises maintenance, etc.)?  Yes  No

1. Type of work \_\_\_\_\_
2. Cost of subcontractor's contract labor \$ \_\_\_\_\_
3. Are subcontractors required to carry insurance?  Yes  No  
If yes, indicate coverage and limits. \_\_\_\_\_
4. Are certificates of insurance required from subcontractors?  Yes  No

## PARK UTILITIES

- |               |   |   |
|---------------|---|---|
| Trash/Garbage | <input type="checkbox"/> City                             | <input type="checkbox"/> Park provides  |
| Electric      | <input type="checkbox"/> Public Utility                   | <input type="checkbox"/> Park provides  |
| Water         | <input type="checkbox"/> Public Utility                   | <input type="checkbox"/> Park/Well      |
| Sewer/Septic  | <input type="checkbox"/> Public Utility                   | <input type="checkbox"/> Park provides  |
| Roads         | <input type="checkbox"/> Public maintains                 | <input type="checkbox"/> Park maintains |
| Gas           | <input type="checkbox"/> Public (tenant pays utility co.) | <input type="checkbox"/> Park provides  |

## GENERAL INFORMATION

1. Are there formal written and enforced park rules?  Yes  No
2. Total capacity of the park \_\_\_\_\_
3. Number of sites rented to others \_\_\_\_\_ Number of vacant sites \_\_\_\_\_
4. Number of units rented to others \_\_\_\_\_ Number of vacant rental units \_\_\_\_\_
5. Total annual receipts \$ \_\_\_\_\_
6. Tenancy annual turnover rate:  Less than 10%  More than 10%
7. Surface area of streets:  100% Paved  Partially Paved  Not Paved
8. Street lighting:  Complete  Partial  None
9. Any real estate development?  Yes  No
  - a. Number of acres \_\_\_\_\_
  - b. Type of development \_\_\_\_\_
10. Any vacant land?  Yes  No Number of acres \_\_\_\_\_
  - a. Is it used as a landfill or dump?  Yes  No
  - b. Does a water exposure exist?  Yes  No
11. Do you own or operate any other business at this location?  Yes  No  
If yes, describe. \_\_\_\_\_
12. Do you sell new or used units?  Yes  No Annual Gross Sales \$ \_\_\_\_\_
13. Do you sell, service or distribute LP/Natural Gas?  Yes  No

- Number of gallons \_\_\_\_\_ Receipts \$ \_\_\_\_\_  
 14. Do you sell or store gasoline?  Yes  No  
 Number of gallons \_\_\_\_\_ Receipts \$ \_\_\_\_\_

**SWIMMING POOLS**

1. Number of swimming areas \_\_\_\_\_
- |   |                          |                          |
|---|--------------------------|--------------------------|
|   | <b>Yes</b>               | <b>No</b>                |
| 2. Is the pool completely fenced, with self closing, self locking gates?      | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are depths marked? Maximum depth ft.                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is standard safety equipment provided?                                     | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is there a diving board or platform?                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is there a water slide of any kind?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Is there a jacuzzi, hot tub or spa?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are rules and emergency numbers posted?                                    | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Is there a lifeguard on duty at any time?                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| If no, is there a sign posted "No Lifeguard on Duty – Swim At Your Own Risk"? | <input type="checkbox"/> | <input type="checkbox"/> |

**OTHER WATER EXPOSURES**

- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | <b>Yes</b>               | <b>No</b>                |
| 1. Are there any water exposures (other than swimming pools) on your property?<br>If yes, describe. _____                          | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Can it be used for swimming?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are "No Swimming" signs posted?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is it used for boating or fishing?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is there a marina on the premises?<br>If yes, are you the operator?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are there docks or slips?<br>Do you charge a fee? If yes, annual receipts. \$ _____<br>Do you or any employee handle the boats? | <input type="checkbox"/> | <input type="checkbox"/> |

**PREVIOUS EXPERIENCE**

1. **MISSOURI APPLICANTS: DO NOT ANSWER THIS QUESTION.**  
 Has insurance of this type been canceled, refused, or nonrenewed by any company during the past 3 years?  
 Yes  No *If yes, give name of company, date and reason.*

PRIOR CARRIER INFORMATION FOR THE PAST THREE YEARS				
Year	Carrier	Policy Number	Coverage	Premium

2. Provide the following information for all claims, suits, or incidents which may give rise to a claim for the past five years. Attach separate sheet if necessary.

Dates (Month/Year)	Description of Loss	Amount	Paid	Reserve

**FRAUD STATEMENT**

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE.

Any person who, with the intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud and subject to fines and/or imprisonment. Any changes in your operation must be reported to your agent.

Signature of Applicant \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Signature of Producing Agent \_\_\_\_\_ Date \_\_\_\_\_

Agent Name and Address \_\_\_\_\_

**RENTAL UNITS**

Complete if applicable.

- 1. Indicate how the rental units were acquired:  Purchased new from dealer  
 Purchased used from dealer  
 Purchased or obtained from previous tenant (*provide circumstances*)
- 2. Rental income per rental unit \$ \_\_\_\_\_
- 3. Maximum occupants per unit \_\_\_\_\_
- 4. Frequency insured inspects inside the rental units. \_\_\_\_\_
- 5. Are units inspected prior to new occupancy?  Yes  No
- 6. Frequency of inspections, by a licensed contractor, of the heating, plumbing and electrical. \_\_\_\_\_
- 7. Are formal maintenance records kept for each rental?  Yes  No ***If yes, attach a sample copy.***
- 8. Are smoke detectors present?  Yes  No Are they:  Hard-wired  Battery operated
- 9. Is there a battery replacement schedule plan in place for smoke detectors?  Yes  No  
If yes, describe. \_\_\_\_\_  
**If no, you must have a waiver/release from the tenant, accepting responsibility for battery replacement.**
- 10. Are fire extinguishers installed?  Yes  No
- 11. Are any rental units over 15 years of age?  Yes  No  
If yes, complete the following for each rental unit and provide photos of the front and back:

Year Built	Year Updated			
	Heating	Plumbing	Wiring	Roofing

- 12. Do all rental units have skirting appropriate for manufactured housing?  Yes  No
- 13. Are there steps at exterior doors with properly installed handrails?  Yes  No  
**Note: Concrete block steps are not acceptable.**
- 14. Lease terms:  Weekly  Monthly  6 Month  12 Month

**Attach a copy of the Park rules.**