



A UNIT OF RSG UNDERWRITING MANAGERS

Investor Real Estate Owned Property & Liability Application

I. CLIENT INFORMATION

Application Date:
Name Insured:
Physical Address:
City/State/Zip:
Company Phone:
Company Website:
Type of Company:
Decision Maker Name:
Decision Maker Title:
Decision Maker Phone:
Decision Maker Email:
If current carrier is Lloyd's of London, please provide the syndicate list.
In addition to purchasing properties, are you involved in lending activities?

II. PORTFOLIO INFORMATION

*Please include with this application a Statement of Value for all properties that the insured wishes to have covered with the following information: property number, property description (single family dwelling, condo, etc.) street address, city, state, zip code, valuation type (replacement cost, market), valuation, construction type, year built, total square feet, and additional structures and their valuation (pools, etc.).

1. Is the insured planning on purchasing additional units during the policy period?
2. Total Insured Value of Portfolio:
3. Property Value Preference:
4. Does the insured wish to purchase flood and/or earthquake coverage?
5. Is the portfolio owned by multiple investors?
If yes, is there a single payment source?

III. PORTFOLIO MANAGEMENT

1. Are third party real estate management firms utilized?
If yes, please provide the name(s) of the third party real estate management firm(s) utilized by the insured, along with a copy of the management contract and the insurance requirements necessary.
2. Does the insured manage properties on behalf of other companies?
3. How long has the insured been in the business of purchasing, renovating, renting properties?
4. Are all properties inspected prior to purchase?
If yes, does the insured have the inspections performed by a third party?

If yes, please list the name(s) of the company(ies): _____

If yes, please describe the inspection process (exterior only, interior and exterior, etc.): _____

If yes, what percentage? _____%

If not all properties are inspected, what percentage are? _____%

5. What is the average time a property asset is held? _____

IV. RENTAL INFORMATION

1. Does the insured utilize a standard lease agreement for the rentals? Yes No
2. Are all prospective renters subject to a background check? Yes No
3. Are all tenants required to purchase renters insurance? Yes No
4. Is the insured exposed to student housing? Yes No
5. Does the insured have subsidized renters? Yes No
6. Does the insured "rent to own" properties to tenants? Yes No
7. What is the vacancy rate for the insured's properties? _____
8. On average, how long is a property vacant between tenants? _____
9. Does the insured rent to seasonal tenants? Yes No
10. Are any of the properties vacation rentals? Yes No
11. Are all doors/sliding glass doors equipped with proper locks and deadbolt locks? Yes No
12. Does each dwelling have two means of egress? Yes No
13. Does each dwelling have smoke detectors and/or fire extinguishers? Yes No
14. Is there a procedure in place to replace smoke detector batteries? Yes No
15. Do any dwellings have decks or balconies? Yes No
16. Do you abide with all state tenant/landlord laws? Yes No

V. PORTFOLIO RENOVATION AND MAINTENANCE

1. Does the insured renovate properties if needed? Yes No
If yes, what is the average cost of renovation per unit? \$: _____
2. On average are the renovations cosmetic or structural? Cosmetic Structural
3. How long is the typical renovation period? _____
4. Does the insured utilize its own construction crew for renovation or does it hire independent contractors? Own Crew Independent Contractors
If the insured utilizes independent contractors, are they required to be fully insured and does the insured require certificates of insurance? Yes No
5. Does the insured maintain a maintenance schedule for its properties? Yes No
6. How often are properties inspected? _____
7. Do you and/or a contracted company winterize the properties? Yes No

VI. INSURANCE PROGRAM

If the insured has a current insurance program:

- 1. Who is the current carrier? _____
- 2. Is the current insurance program on a master policy or individual property policy basis? Master Policy Individual Property Policy

***Please provide the following: 3 years of currently valued loss runs.**

- 3. Property Deductible Per Occurrence Preference (ex. CAT): \$2,500 \$5,000 \$10,000
 \$25,000 Other: _____
- 4. This coverage offers a \$1,000,000/\$2,000,000 General Liability limit. Does the client desire to purchase excess liability coverage? Yes No
If yes, please indicate additional coverage limits desired: \$1,000,000 \$2,000,000 \$5,000,000
 \$10,000,000 Other: _____
- 5. Has the insured ever had his/her insurance program non-renewed or canceled? Yes No
If yes, please explain: _____

VII. ADDITIONAL QUESTIONS

- 1. Are any of the following exposures present at any of the insured's properties? Swimming Pools Trampolines
 Playground Sets
- 2. Are the insured's tenants allowed to own dogs? Yes No
If yes, please describe any restrictions on size and breed: _____

Insurance Broker:

Agency Name: _____
Broker Name: _____
Broker Phone: _____ Broker Email: _____

Signature: _____ Date: _____

Name (print): _____ Title: _____

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