



REGIS APARTMENT SUPPLEMENT

P.O. Box 686 Southeastern, PA 19399
Phone 610-647-1280 Fax 610-647-4630

PRODUCER

1) PRODUCER— COMPANY NAME _____

2) PRODUCER— REPRESENTATIVE NAME _____

APPLICANT INFORMATION

3) RISK NAME _____

(Please fill out a separate application for each building at a Risk Address)

4) RISK ADDRESS _____

5) BUILDING NUMBER FOR RISK _____

(Enter 1st, 2nd, 3rd, etc. to indicate to which building at the Risk Address this Supplement applies)

6) YEARS AT ADDRESS _____

PREMISES INFORMATION

7) TOTAL SQUARE FOOT AREA OF EACH BUILDING ? _____

8) TOTAL NUMBER OF UNITS IN EACH BUILDING ? _____

9) OCCUPANCY RATE ? _____

10) AVERAGE MONTHLY RENTAL RATE ? _____

11) TOTAL ANNUAL RENTAL RECEIPTS (THIS BUILDING) ? _____

12) HARDWIRED OR BATTERY-OPERATED SMOKE DETECTORS ? _____

13) DOES BUILDING HAVE A FIRE ESCAPE ? _____

14) NUMBER OF EXITS PER FLOOR ? _____

15) ILLUMINATED EXIT SIGNS ? _____

16) ADEQUATE INTERIOR AND EXTERIOR LIGHTING ? _____

17) ANY HUD, SECTION 8 OR SUBSIDIZED HOUSING ? _____

18) STUDENT HOUSING ? _____

19) DOES INSURED EMPLOY A PROPERTY MANAGER OR A PROPERTY MANAGEMENT COMPANY ?
