



MOBILE HOME APPLICATION

NOTE: COMPLETE QUALIFICATION CRITERIA SECTION ON REVERSE SIDE FIRST!

Named Insured and Producer information section including Name, Address, DOB, Agent Name, and Request Policy Term details.

Location and Lienholder information section including Park Name, Address, Protection Class, and Lienholder Name/Address.

Table with 8 columns: Year, Manufacturer/Model, Length, Width, Serial Number, Purchase Date, Purchase Price, Current Value. Includes rows for Describe Additions/Attached Structures and Describe Unattached Structures.

MUST COMPLETE THE FOLLOWING and POLICY INFORMATION sections. Includes usage options, rates, coverages, limits, and premium details.

GENERAL UNDERWRITING INFORMATION

1. Applicant's employer _____ Years Employed _____
2. Spouse's occupation _____ Spouse's Employer _____ Years Employed _____
3. Is other insurance in effect on the home, unattached structures or personal effects? No Yes _____
4. Neighborhood: Good Fair Poor Near Creek/River (Flood Area)? Yes No

UNACCEPTABLE RISKS – DO NOT BIND, DO NOT SUBMIT

Any "Yes" Response Makes The Risk Unacceptable!

	Yes	No
1. Has applicant, spouse or additional insured had a total fire loss within the past 5 years?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the applicant/spouse had repossessions, foreclosures, bankruptcy, judgments, multiple bad debts or charge offs filed, or been delinquent in mortgage payments more than 90 days in the past 4 years?	<input type="checkbox"/>	<input type="checkbox"/>
3. Has any applicant ever been convicted of arson or fraud?	<input type="checkbox"/>	<input type="checkbox"/>
4. Is the home without permanently installed water, electricity, and sewage utility services?	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the home have any existing damage?	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the home vacant or in foreclosure?	<input type="checkbox"/>	<input type="checkbox"/>
7. Is the home joined together or homemade? Separate singlewide homes joined together to form a multi-sectional home are ineligible.	<input type="checkbox"/>	<input type="checkbox"/>
8. Is the home isolated from an easily accessible public roadway?	<input type="checkbox"/>	<input type="checkbox"/>
9. Does the home have any kerosene heater, any space heater or any potentially hazardous supplemental heating device?	<input type="checkbox"/>	<input type="checkbox"/>
10. Does the home have a fireplace that was not installed by the manufacturer or a licensed contractor?	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the home have Polybutelene pipes?	<input type="checkbox"/>	<input type="checkbox"/>
12. Is the home in an area subject to mudslides, brush fires or high crime?	<input type="checkbox"/>	<input type="checkbox"/>
13. Does the home have more than 2 lienholders? Two lienholders are acceptable if one is a financial institution.	<input type="checkbox"/>	<input type="checkbox"/>
14. Is the home located on an island, key or peninsula or located within 1,500 feet from any lake, river or seacoast? If yes, ineligible for Flood Coverage. The risk may be written if Flood coverage is not purchased.	<input type="checkbox"/>	<input type="checkbox"/>
15. Is the home located in a Special Flood Hazard Area or on a site that has flooded in the past 10 years? If yes, ineligible for Flood coverage. The risk may be written if Flood coverage is not purchased.	<input type="checkbox"/>	<input type="checkbox"/>
16. Risks with unattached adjacent structures not incidental to the use of the home as a dwelling including:	<input type="checkbox"/>	<input type="checkbox"/>
a. Any structure that exceeds 800 square feet in floor area.		
b. Unattached structure that is a home, site built house, barn (livestock structure), or used as living quarters		
c. Unattached structure that exceeds 50% of the value of the home.		
17. Is there business, child care, lodging, or farming activities conducted on the premises?	<input type="checkbox"/>	<input type="checkbox"/>
18. Are activities being conducted on the premises such as woodworking, cabinet making, auto repair, chemical processing or is the home attached to a tavern or restaurant?	<input type="checkbox"/>	<input type="checkbox"/>
19. Is there a swimming pool located on the premises? If yes, but does not meet the following criteria, the Policy must have NO liability coverage:	<input type="checkbox"/>	<input type="checkbox"/>
The swimming pool must have a four foot fence with a self locking gate and there must not be a diving board or slide.		
If you meet these requirements, you may submit the application with a \$25,000 liability limit.		
20. Is there a trampoline or other similar hazard on the premises that reflects an increased liability hazard? If yes, the Policy must have NO liability coverage.	<input type="checkbox"/>	<input type="checkbox"/>
21. Is the home without permanently installed steps at all entrances?	<input type="checkbox"/>	<input type="checkbox"/>

SUBMIT RISKS TO GENERAL AGENT – DO NOT BIND

Any "Yes" Response Must Be Explained Below and Submitted Unbound.

	Yes	No
1. Has the applicant had a fire, liability, theft loss or 2 losses or more of any type in the past 5 years?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the applicant had a mobile home/dwelling policy cancelled or non-renewed for underwriting reasons (except age of unit during the past 5 years)?	<input type="checkbox"/>	<input type="checkbox"/>
3. Is applicant unemployed? (Retirees with guaranteed income are considered employed.) If employed, list occupation on front of application. If unemployed, explain means of support:	<input type="checkbox"/>	<input type="checkbox"/>
4. Has applicant had a lapse in insurance coverage over 60 days?	<input type="checkbox"/>	<input type="checkbox"/>
5. a. Is any entrance or exit with 3 or more steps not equipped with handrails?	<input type="checkbox"/>	<input type="checkbox"/>
b. Are any handrails unstable?	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the home in the course of construction?	<input type="checkbox"/>	<input type="checkbox"/>
7. Does the home have attached or unattached structures (other than porches, decks, awnings, skirting and carports) that are not factory or non-contractor built? Any addition must have been inspected for compliance to local codes or been completed for at least 3 years.	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the home have a wood, coal, or pellet burning stove?	<input type="checkbox"/>	<input type="checkbox"/>
9. Risks where the value of personal effects exceeds \$15,000 and is 75% of the value of the mobile home? (Submit with Personal Effects Inventory)	<input type="checkbox"/>	<input type="checkbox"/>
10. Is the home a corporate risk, a risk with multiple individuals as Named Insureds, or property sold on land contract?	<input type="checkbox"/>	<input type="checkbox"/>
11. Are there horses, livestock or any farm animals on the premises?	<input type="checkbox"/>	<input type="checkbox"/>
12. Does applicant own, keep or shelter, even temporarily, or plan to own, keep or shelter, even temporarily, any of the following types of animals: Doberman, Pit Bull, Chow, Rottweiler, Great Dane, Akita, Wolf or Wolf Hybrid, including mixed breed animals whereby one or more of the breeds is one of the aforementioned breeds, or any animal with a previous bite history?	<input type="checkbox"/>	<input type="checkbox"/>
13. Have there been any home or dwelling losses in the past 5 years? If yes, describe losses of any type in the past 5 years.	<input type="checkbox"/>	<input type="checkbox"/>
Date _____ Type _____ Amount _____		
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Explain "Yes" answers! _____

Fair Credit Reporting Act – "Pursuant to requirements of the Fair Credit Reporting Act, you are hereby advised that in connection with your application for insurance, an investigative consumer report including information as to character, general reputation, personal characteristics, mode of living, may be made. You are entitled upon submission of a written request to be furnished with a complete disclosure of the nature and scope of any such report."

MISREPRESENTATION OF FACTS

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

X _____
MUST BE SIGNED (Signature of Applicant)

Date

X _____
MUST BE SIGNED - Signature of Producer

Date