

American Modern MANUFACTURED HOMEOWNERS Worksheet

THIS IS NOT AN APPLICATION

			INFO	RMATIO	Ν					
LAST NAME FIR						HONE ()				
			WORK PHONE				HONE ()		
						E-mail A				
MAILING ADDRESS					C	NTY	STA	ΓE	ZIP	COUNTY
DATE OF BIRTH		OCCUPATIO	NC	MARTI	AL ST	ATUS	SOCIAL	SECURIT	Y NUMBER	
CO-APPLICANT'S LAST I	NAME	FIRST	MIDDLE INITI	AL	SC	OCIAL SEC	CURITY NU	MBER	DATE	OF BIRTH
LOCATION OF HOME			CITY		STATE		ZIP		COUNTY	
					0 // (1 2					
PARK / COMMUNITY NAI	ME WHERE	HOME IS LO	CATED			LOT #	ŧ			
PERIOD OF INSURANCE EFFEC		TIVE DATE		EXPIRATION DATE		TE I		MONTHS		
12:01 A.M. STANDARD TI	ME _									
MORTGAGEE/LIEN		LOSS PAY	EE Mark box	for additi	onal	Mortgage	e and show	v in "Rer	narks" on back	of application.)
NAME				ioi adam		ACCT./LO/				or approation)
ADDRESS				CITY			STA	ΓE		ZIP
				-			-			
			DESCRIPT	ION OF H	IOME	1				
YEAR	MAKE / MOD	EL		SEI	RIAL	NUMBER			LENGTH	WIDTH
PHYSICAL CHAF	ACTERIST		PURCHASE DATE	= 1		PURC	HASE PRIC	E	Dwe	L Iling Limit
HOW IS THE HOME US		100				(Excludin	ng land, if app	licable)	\$	
Primary Residence (pied)	IMPORTANT: CH							
Geasonal Residence			Territory			ct Code			emium From Ra	
Rental			Territory	'	Touu			\$	emuniniomina	le Manual
Commercial				1		C	odes	Limit	of Liability	
Tenant How many miles is home	from Eiro D	ant 2	Dwelling (Incl. Attached Stru	oturoc)						
How many miles is home	Irom Fire De	ept. ?	,	clures)		_		¥		
LOCATION	orle with		Personal Property			_		\$		
Is the home located in a p 25 or Less Spaces		lore	Adjacent / Other Structures Personal Liability / Premises Liabili			_		Ŧ		
□ 25 of Less Spaces	Not in P					pility				
1 28 - 50 1 51 - 100	Private		Deductible			_		\$		
	Unknow	n						\$		
		YES NO						\$		
Is home on permanent for	undation							\$		
Is land owned by client?	it							\$		
Does home have a comp Does home have protecti								\$		
Is the home located inside	-							\$		
Is home tied down?									TOTAL	
Has the home been previously titled?							PREMIUM			
Is the risk a modular hom	e?									
			NC	DTES						

	UNDERW	RITING QUESTIONS All que	estions must be ans	wered. (Explain a	any YE	S an	swers in "Remarks" below	<i>ı</i> .)
					YES	S NC)	
1.	Does the home have a sup	plemental heating device?						
2.	Is the applicant unemployed	d other than disabled or retired?	?				Do Not Bind / Do Not S	Submit
		pankruptcy in the past 5 years?					Do Not Bind / Submit for	or approval
4. Has the applicant had any similar insurance declined, canceled or non-renewed?							Do Not Bind / Submit for	
5. Has the dwelling gone uninsured for more than 30 days but less than or equal to 90 days?							Do Not Bind / Submit fe	
	5a. Has the dwelling gone uninsured for more than 90 days?6. Is there a swimming pool on the premises that is not enclosed by a fence at least 4 feet						Do Not Bind / Do Not S	Submit
6.								
		if above ground, does not have	steps/ladder that	can be				
	secured or removed when i				_	Ц	Policy MUST be submit	
7.	 Does the applicant own any large, unusual or vicious animals? (includes pitbulls, rottweilers, dobermans, chows, wolf hybrids, any exotic animals) 						Policy MUST be submit	
	rottweilers, dobermans, chows, wolf hybrids, any exotic animals)						Liability Exclusion; or w	ritten without Liability
8.	 Is the home located on a site with prior occurrences of brushfires, landslides or flooding? 							
	or flooding?						Do Not Bind / Do Not S	
	9. Is the home located on an island, or within a 1000 feet of a river or seacoast?10. Is the home supported on raised poles or pilings?						Do Not Bind / Do Not S Do Not Bind / Do Not S	
		ction, undergoing renovations t	that require the h	omo to			DO NOL BING / DO NOL S	Submit
11.	be vacated, or not connect		inal require the m	ome to			Do Not Bind / Do Not S	Submit
12	-	commercial, farming or busines	s operation on th	o promisos?	_	ŏ	Do Not Bind / Do Not S	
	Is the home vacant?	oninercial, farming of busines		e premises:	_		Do Not Bind / Do Not S	
		ure or are mortgage payments	s 60 days or more	e nast due?	_		Do Not Bind / Do Not S	
		than two lienholder mortgage				ŏ	Do Not Bind / Do Not S	
		Fire, Theft, Liability, Water and		the	_	_		
	last three (3) years?	, , , ,					Do Not Bind / Submit for	or approval
17.	() 3	(2) or more Fire, Theft, Liability	, Water and/or Fl	ood				
		, in the last three (3) years?					Do Not Bind / Do Not S	Submit
18.	Has the applicant had three	e (3) or more property losses i	n the last 3 years	s?			Do Not Bind / Do Not S	Submit
19.	Are there any attached or	unattached structures on the p	oremises?		_		List structures below	
20.	Is there any unrepaired da	mage or boarded-up windows?	?				Do Not Bind / Do Not S	Submit
		y unrepaired water damage or					Do Not Bind / Do Not S	Submit
22.		employee who works over 20			_	_		
	the insured residence or ov	ver 10 hours per week outside	the insured pren	nises?			Do Not Bind / Do Not S	Submit
		LOSS HISTORY - MUSTLIST	ALL OF APPLICANT	"SLOSSESFOR	THELA	STT	HREE YEARS.	
	Date of Loss		ALL OF APPLICANT					Amount of Loss
	Date of Loss	Cause	ALL OF APPLICANT	Description (I				Amount of Loss
	Date of Loss		ALL OF APPLICANT					Amount of Loss
	Date of Loss		ALL OF APPLICANT					Amount of Loss
	Date of Loss	Cause		Description (I	f none	e, wr		Amount of Loss
		Cause	IRES ATTACHE	Description (I	f none	e, wr	ite "None")	
	Date of Loss	Cause		Description (I	f none	e, wr		Amount of Loss
		Cause	IRES ATTACHE	Description (I	f none	e, wr	ite "None")	
	Description	Cause Cause Construction Type	JRES ATTACHE Size	Description (I ED TO THE H Age	f none	e, wr	ite "None") Actual Cash Value	Replacement Cost
	Description	Cause Cause Construction Type TURES ON PREMISES (Incl	JRES ATTACHE Size Iuding Satellite	Description (I ED TO THE H Age	f none	e, wr A	ite "None") Actual Cash Value CHED TO THE HOME	Replacement Cost
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