

## HABITATIONAL SUPPLEMENT (Include Acord Application)

Phone: Fax:    Fax:   F	Αp	plica	Applicant/Named Insured:	KISHORE RASURI
Location Address:  Website Address:  Policy Number:  Contact Person (Owner/Manager):  Location street address, city, county, state and zip code (if more than 4 locations, attach separation street address, city, county, state and zip code (if more than 4 locations, attach separation #1:  Location #1:  Location #2:  Location #2:  Location #4:  Location		Mai	iling Address:	
Website Address:		Loc	cation Address:	
Contact Person (Owner/Manager):  Contact Person (Owner/Manager):  Location #1:  Location #1:  Location #2:  Location #2:  Location #3:  Location #4:  Fire Protection and Security Information  a. Sprinkler system (X all applicable):  Common areas  No  Common areas  No  Common areas  No  If yes, select type:  Battery  Hallway leading to bedroom?  Pes No  Efric Extinguishers:  In each unit?  Yes No  If yes, distance between buildings:  Gated Access  Jahour security?  If yes, Armed?  Yes No  If yes, distance between buildings:  Gated Access  How is access obtained?  Who is given access?  If alarm system, who monitors the system?  Are alarm systems in every unit?		We	bsite Address:	
Location street address, city, county, state and zip code (if more than 4 locations, attach sepan Location #1:		Pol	icy Number:	
Location #1:	<del></del>	Co	ntact Person (Owner/M <del>anag</del> e	KISHORE RASURI Phone:
Location #1: WindSong Circle; 2005 Brunswick, NT  Location #2: Location #3: Common areas  Location #4: Locati	,	Loc	cation street address, city, c	, county, state and zip code (if more than 4 locations, attach separate schedule)
Location #3:  Location #4:  Fire Protection and Security Information  a. Sprinkler system (X all applicable):		Loc		Circle, East Bruswill,
Location #3:    Cocation #4:		Loc	cation #2:	
Fire Protection and Security Information  a. Sprinkler system (X all applicable):		Loc	cation #3:	
a. Sprinkler system (X all applicable): Common areas Trash chutes All unb. Central station fire alarm?  c. Working standpipes on every floor? Yes No If yes, select type: Battery Hand. Smoke detectors in each living unit? Yes No If yes, select type: Battery Hand. Smoke detectors in each living unit? Yes No If yes, distance between buildings? Yes No If yes, distance between buildings: Separation between buildings? Yes No If yes, distance between buildings: Separation between buildings? Yes No If yes, distance between buildings: Separation between buildings? Yes No If yes, Dated Access Alarm (Yes)  g. Is security provided? Yes No If yes, Independent/Contracted Cost: \$  Unarmed? Yes No Employee Payrol: \$  Yes How is access obtained?  Who is given access?  i. If alarm system, who monitors the system?  Yes Yes No If yes, distance between buildings: Separation between bu		Loc	sation #4:	
Sprinkler system (X all applicable): Common areas	ω	Fire	e Protection and Security In	Information
Central station fire alarm?  Working standpipes on every floor?  Working standpipes on every floor?  Smoke detectors in each living unit?  Hallway leading to bedroom?  Fire Extinguishers:  In each unit?  Yes No  Separation between buildings?  Is security provided?  If yes, Armed?  Unarmed?  Yes No  If yes, distance between buildings:  Yes  No  If yes, Dated Access Alarm system?  Independent/Contracted Cost:  How is access obtained?  Who is given access?  If alarm systems in every unit?  Yes  No  If yes, armed?  Yes  No  If yes, Dated Access Alarm system?  Independent/Contracted Cost:  Yes  Yes  Yes  Independent/Contracted Cost:  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Ye		៉ីហ	Sprinkler system (X all applic	☐ Common areas ☐ Trash chutes
Working standpipes on every floor?  Smoke detectors in each living unit?  Yes No If yes, select type: Battery Han Hallway leading to bedroom?  Fire Extinguishers: In each unit? Yes No If yes, distance between buildings? Yes No If yes, distance between buildings: Separation between buildings? Yes No If yes, distance between buildings: Separation provided?  If yes, Armed? Yes No If yes, Datrol Gated Access Alarm to the security is Independent/Contracted Cost: Separation provided? Independent/Contracted Cost: Separation provided Cost: Separati		Ö	Central station fire alarm?	1 1
Smoke detectors in each living unit?    Yes   No   If yes, select type:   Battery   Han Hallway leading to bedroom?   Yes   No   No   If yes, distance between buildings?   Yes   No   If yes, distance between buildings:   So me!   Security provided?   Yes   No   If yes, distance between buildings:   So me!   Security provided?   Yes   No   If yes, distance between buildings:   So me!   Security provided?   Yes   No   If yes, distance between buildings:   So me!   Security provided?   Yes   No   If yes, distance between buildings:   So me!   Yes   Shour security?   Yes   No   If yes, distance between buildings:   So me!   Yes   Shour security?   Yes   No   If yes, distance between buildings:   So me!   Yes   Shour security?   Yes   No   If yes, distance between buildings:   So me!   Yes   Shour security?   Yes   Shour security?   Yes   Shour security?   Yes   Shour security?   Yes   Yes   Shour security?   Shour security?   Yes		Ö	Working standpipes on every	⊠Yes [
Hallway leading to bedroom?  Fire Extinguishers: In each unit? Yes No In common areas? Yes Separation between buildings? Yes No If yes, distance between buildings: Separation between buildings? Yes No If yes, distance between buildings: Separation buildi			Smoke detectors in each livir	Yes No If yes, select type:
Fire Extinguishers: In each unit?			Hallway leading to bedro	☐ Yes ☐
Separation between buildings?  If yes, Armed?  Unarmed?  If yes, Armed?  If security is Independent/Contracted, are certificates required?  How is access obtained?  Who is given access?  If yes, DNo  If yes, Patrol Gated Access Alarm S   Yes   No   Independent/Contracted Cost: \$   Yes   No   Employee   Payroll: \$   Yes   Yes   Yes   No   Patrol Gated Access Alarm S   Yes   Yes   Yes   No   Patrol Gated Access Alarm S   Yes   Yes   No   Patrol Gated Access Alarm S   Yes   Yes   Yes   No   Patrol Gated Access Alarm S   Yes   Yes   Yes   No   Patrol Gated Access Access Alarm S   Yes   Yes   Yes   No   If yes, Gated Access Access Alarm S   Yes   Yes   No   If yes, Gated Access Access Alarm S   Patrol Gated Access Access Alarm S   Yes   Yes   Yes   No   If yes, Gated Access Access Alarm S   Yes   Y		Ф		☐ Yes ☐ No In common areas? ☐ Yes
Is security provided?  24-hour security?  If yes, Armed? Yes Yoo   Independent/Contracted Cost: \$ Yes			Separation between building:	Yes No If yes, distance between buildings:
24-hour security?   Yes   Yes   Independent/Contracted   Cost: \$   Yes   Unarmed?   Yes		Ģ	Is security provided?	If yes, ☐ Patrol ☐ Gated Access
If yes, Armed? Yes YNo Independent/Contracted Cost: \$ Unarmed? Yes YNo Employee Payroll: \$ Yes  If security is Independent/Contracted, are certificates required? Yes  If gated, is the entire complex gated?  How is access obtained? Yes  Who is given access?  If alarm system, who monitors the system?  Are alarm systems in every unit?			24-hour security?	☐ Yes ☐ N
Unarmed? Yes YNo Employee Payroll: \$			Armed?	☐ Independent/Contracted Cost:
If security is Independent/Contracted, are certificates required?  If gated, is the entire complex gated?  How is access obtained?  Who is given access?  If alarm system, who monitors the system?  Are alarm systems in every unit?			Unarmed? ☐ Y	☐ No ☐ Employee
If gated, is the entire complex gated?  How is access obtained?  Who is given access?  If alarm system, who monitors the system?  Are alarm systems in every unit?			If security is Indepen	□Yes
How is access obtained?  Who is given access?  If alarm system, who monitors the system?  Are alarm systems in every unit?		ħ	If gated, is the entire complex	□Yes
Who is given access?  If alarm system, who monitors the system?  Are alarm systems in every unit?			How is access obtained?	d?
If alarm system, who monitors the system?  Are alarm systems in every unit?			Who is given access?	
		(N)	If alarm system, who monitors the systems in every unit?	☐ Yes

a. Number of stories: 2	4. General Information
8: 2	_

		h A	f. Ar	e. Ar	d. Ar	c. Ar		b. A	₽						a A	Recre	<u>с</u> <u>П</u>	ς.	, b D	a P	Hotel	d. ≱		с Н	.p. ‡ ∓		<i>ĕ</i> == 2
Any horse:	ny golf courses	Any picnic areas?	זy exercise or	Any club houses?	Any motorcycle or ATV trails?	Any bike paths?	If yes, provi	Any dams?	ovide details	Diving platfo	Powered bo	Boat rentals?	Boat docks/slips?	Boat ramps?	e there lakes	Recreational Facilities	ectric door wit	on-slip surface	Dead bolts in each unit door?	зер holes in e	Hotel or Motel	e any of the a	If yes, how i	Has applicant re	there have been a e insured taken pr	are interior	If over 3 stories:
Pasturing? Stables?	Any golf courses and/or driving range?	s?	Any exercise or weight rooms?	5?	or ATV trails?	-	If yes, provide inspection report and pictures of dam (include downstream exposure).		Provide details of all boat rentals:	Diving platforms (permanent or floating)?	Powered boats allowed on lake?	;?	slips?	.?	Are there lakes on the property?	ties	Electric door with card key system used?	Non-slip surface in all tub/shower areas?	ach unit door?	Peep holes in each unit door?		Are any of the applicant's properties subject to rent control laws?	If yes, how many of these claims were paid?	applicant received any claims for wrongful eviction in the past five (5) years?	otective safeguar	are interior stairwells equipped with self-closing locking fire doors on each floor?	
☐ Yes ☐ No	☐ Yes ☑No	☐ Yes ☑ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☑ No	☐ Yes ☑ No	d pictures of dam (	☐ Yes ☑ No		iting)?	☐ Yes ☐ No	☐ Yes ☑ No	Yes No	Yes Wo	Yes No		<b>3</b> 5	\$?				bject to rent contro	ere paid?	vrongful eviction in	claims within the past the ds to ensure this doesn'	າ self-closing lockir	
Rental? Riding Ring?	If yes, provide details:	If yes, # of areas:	If yes, # of rooms:	If yes, total square	If yes, # of miles:	If yes, # of miles:	include downstrear				Personal watercraft?	If yes, # of boats:	If yes, # of slips:	If yes, provide receipts:	If yes, provide total acreage:							ol laws?	Provide details:	the past five (5) ye	ast three (3) years, ha esn't happen again?	າg fire doors on ead	
Yes No	tails:			e footage:			n exposure).				raft?	s: Receipts:		eceipts:	otal acreage:								tails:	ears?	has	ch floor?	
										☐ Yes ☐ No	☐ Yes ☐ No						☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No		☐ Yes ☑ No		☐ Yes ☐ No	Yes No	Yes YNO	

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		20		Other:
		200		Roof
				Plumbing
		3-3		HVAC
2 Location #3 Location #4	Location #2	Location #1		
e or Renovation	ear of Upda	4		Type of Update
n separate page)	al locations o	on additiona	rovide information	Renovations and/or Recent Updates (provide information on additional locations on separate page)
	-	`	clude receipts:	
:? ☐ Yes ☐ 100	to the public	l.) available	icilities (a. through	m. Are any of the previous recreational facilities (a. through l.) available to the public?
s: O Spas: O	Saunas:	ks: O	Playgrounds or parks:	Handball court rooms:o
Squash Courts: 🖸	0	Racquetball Courts:	© Racque	I. Number of: Basketball Courts:
If yes, how many? If yes, provide total # of days:		☐ Yes ☐ No	Swim teams?	Does applicant sponsor: S
Other	Company	nagement C	cant	Lifeguards provided by: 🏻 Applicant
		Contractor	cant	Pool maintained by: Applicant
iilable at ☐ Yes ☐ No	d's hook, ava	ot shepherc	ing buoy and 12 fo	Is rescue equipment, including a ring buoy and 12 foot shepherd's hook, available at poolside?
arly visible? 🔲 Yes 🗌 No	tutes and cle	ith local stat	ed in accordance w	Are warning signs and rules posted in accordance with local statutes and clearly visible?
☐ Yes ☐ No		gulations?	all codes, Acts or re	Do drain covers meet or exceed all codes, Acts or regulations?
☐ Yes ☐ No			1?	Are depth markings clearly shown?
☐ Yes ☐ No			e pool area?	Do any doors open directly into the pool area?
1			ınd/or fence:	If yes, provide height of wall and/or fence:
f-latching ☐ Yes ☐ No	-closing / self	ng with self-	ed by walls or fenci	Is pool area completely surrounded by walls or fencing with self-closing / self-latching gate?
☐ Yes ☐ No			ails?	Steps into shallow end with handrails?
			☐ Yes ☐ No	Underwater lighting?
			☐ Yes ☐ No	Slides?
	If yes, provide height:	If yes, p	☐ Yes ☐ No	Diving boards?
				How many pools?
(If yes, answer the remaining questions in 8.k.)	Inswer the r	(If yes, a	☐ Yes ☑ No	k. Are there any swimming pools?

7.

œ Description of Location(s) (provide information on additional locations on separate page)

\* Occupancy Type: A = Apartment Building
B = Garden Apartments
C = Apartment - Hotel / Timeshare
D = Dwelling / One Family E = Dwelling / Two Family
F = Dwelling / Three Family
G = Dwelling / Four Family
H = Boarding or Rooming House I = Fraternity / Sorority House
J = Mote!
K = Hote!
L = Condominium

\*\* Construction type: F = Frame (including corrugated metal, stucco & non-combustible)

MFR/FR = Modified Fire Resistive / Fire Resistive JM = Joisted Masonry / Brick
MNC = Masonry Non-Combustible

Yes   No	∐ Yes ∐ No	Yes   No	Yes No	Protection class:
			Yes 🖳	Any carports?
	☐ Yes ☐ No	☐ Yes ☐ No		Is location on historical register (local, county, state, national)?
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	□Yes □ No	Any wood burning stoves or fireplaces?  If yes, date of last inspection/cleaning:
			Jentral gas	If space/portable heating: is it UL electric, Kerosene, vented gas or unvented gas?
				Type of heating system
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	Any wood shake shingle roofs?
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	Yes Who	If > 3 stories, are interior stairways equipped with self closing/locking fire doors on each floor?
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	o fire w
□C □A □P	□c □A □P	□C □A □P	UC □A □P	Wiring type: Copper, Aluminum, Pigtailed
			☐ Yes ☐No	Is location an assisted living facility?
Yes No	☐ Yes ☐ No ☐ Yes ☐ No	☐ Yes ☐ No Yes ☐ No	☐ Yes ☐ No ☐ Yes ☐ No	If yes, is medical assistance offered? Any emergency pull cords or buttons?
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☑ No	Is location a retirement and/or elderly facility?
				% of student renters
				% of units subsidized
				% of units rented to others
\$ \( \text{Yes} \) \( \text{No} \)	\$ \( \text{Yes} \) \( \text{No} \)	⊈ Yes ∐ No	\$ Yes Lino	Does association receive rental revenue? If yes, provide annual revenue
☐ A ☐ U Other:	☐ A ☐ U Other:	□ A □ U □ Other:	□ A □ U □ Other:	Who handles rentals?  A = Association, U = Unit Owner
				% short term (less than 30 days)
				% long term (more than 30 days)
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐Ño	Is there a timeshare exposure?
			10%	% of units vacant
			90-1	% of units owner-occupied
123 Other:	☐1 ☐2 ☐3 ☐Other:	123 Other:	Other:	# of bedrooms (check all applicable):
			١, ١	Monthly rent per unit
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ Yoo	Is manager on premises?
			350,000	
/	/	/	806/29	# of total units / buildings
			2	# of stories
			igg1	Year built
			Π	Construction type ** (see list above)
			_	Occupancy type * (see list above)
				Years owned by insured
Location #4	Location #3	Location #2	Location #1	Description

have been suppressed or misstated The Applicant, Agent and/or Broker represents that the above statements and facts are true and that no material facts

Completion of this form does not bind coverage or commit the Company to policy issuance

## NOTICE TO APPLICANTS (EXCEPT CO & NY):

confinement in prison, presents false information in an application for insurance may be guilty of a crime and may be subject to fines or Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly

## NOTICE TO COLORADO APPLICANTS:

insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claiming with regard to a settlement or award payable for denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, Agencies

## NOTICE TO NEW YORK APPLICANTS:

each such violation and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime Any person who knowingly and with intent to defraud any insurance company or other person files an application insurance or statement of claim containing any materially false information, or conceals for the purpose of

Applicant Signature Date	Trodinger Signature
Applicant Signature Date	
The state of the s	
10 HOS SACIOT	Rahore