

Member Companies of Western World Insurance Group

☐ Western World Insurance Company

☐ Tudor Insurance Company

☐ Stratford Insurance Company

General Liability Application

For

Condominium or Homeowners' Association

Name of Applicant _____

Address _____

Inspection phone # _____ Contact person _____

Applicant's Web Site Address _____

☐ Individual ☐ Corporation ☐ Partnership ☐ Joint Venture ☐ Limited Liability Company

☐ Other (Specify) _____

Limits of Liability Requested

General Aggregate \$ _____

Products and Completed Operations Aggregate \$ _____

Personal and Advertising injury \$ _____

Each Occurrence \$ _____

Damage to Premises Rented to you \$ _____

Medical Expense (any one person) \$ _____

Other Coverages, Restrictions, and/or Endorsement Deductible _____

Effective Dates Desired: From _____ To _____

A. Years in business _____ When was construction of units completed? _____

B. Have all development and/or construction operations been completed? ☐ Yes ☐ No

C. Number of units _____ Single Family Homes _____ Town homes _____ Condos _____

Rental Units _____ Commercial Condos _____ Time -Shares _____

D. Number of stories _____ Sprinkled? ☐ Yes ☐ No Fire resistive? ☐ Yes ☐ No

E. How many swimming pools? _____ Number of diving boards, pool slides, or diving platforms? _____

Any diving boards, pools, slides, or diving platforms over 8 ft. in height? ☐ Yes ☐ No

Indoor or outdoor pool (circle one) _____ Depth of water? _____ ft.

Are rules posted? ☐ Yes ☐ No Are pools fenced? ☐ Yes ☐ No

Are gates self closing and locking? ☐ Yes ☐ No Lifeguards on duty when pool is open? ☐ Yes ☐ No

F. Number of:	Clubhouses	_____	Convenience Stores	_____	Saunas	_____
	Spas	_____	Baseball diamonds	_____	Volleyball courts	_____
	Tennis courts	_____	Basketball courts	_____	Racquetball courts	_____
	Playgrounds	_____	Lakes (no. of acres)	_____	Diving rafts	_____
	Ice Skating	_____	Bathing beaches	_____	Private airports	_____
	Boat docks	_____	Boat rentals	_____	Restaurant/Lounges	_____
	Private airports	_____	Shooting Ranges	_____	Vacant Land (# of acres)	_____
	Jet skiing allowed	_____	Other facilities/activities	_____		

- G. Any waterworks/sewage treatment/disposal facilities? ☐ Yes ☐ No
Describe in detail. _____
Any dams? ☐ Yes ☐ No
Describe _____
- H. Is the association responsible for maintenance of roads? ☐ Yes ☐ No
If so, how many miles of road? _____
- I. How many parks? _____ Describe in detail: _____ How many trails? _____
- J. Any horse trails or bike trails? ☐ Yes ☐ No
If yes, how many miles of trails? _____ Describe trails in detail: _____
- K. Any stables? ☐ Yes ☐ No Riding arenas ☐ Yes ☐ No
Jumps? ☐ Yes ☐ No Saddle animals for hire? ☐ Yes ☐ No
- L. Is this a master association which provides group common areas for individual associations? ☐ Yes ☐ No
- M. Does association include commercial and/or institutional members? ☐ Yes ☐ No
- N. Any security guards on premises? ☐ Yes ☐ No
If yes, how many? _____ Are they armed or unarmed?
Does association directly employ guards? ☐ Yes ☐ No
If outside security service, are certificates of insurance required? ☐ Yes ☐ No
- O. Total number of employees? _____
- P. Does applicant have Workers Compensation coverage in force? ☐ Yes ☐ No
- Q. Does applicant lease employees? ☐ Yes ☐ No
- R. Any special events? ☐ Yes ☐ No
- S. Any sponsored athletic teams? ☐ Yes ☐ No
If yes, please describe: _____
- T. Any other exposures for which the association is responsible? ☐ Yes ☐ No
Describe: _____
- U. Please attach any descriptive advertising literature.

Previous Insurer: Indicate premium and losses for the past three years. Describe all losses.

YEAR	COMPANY	POL#	PREMIUM	LOSSES RESERVED	DESCRIPTION

This application does not bond the applicant nor the Company to complete the insurance, but it is agreed that the information contained herein shall be the basis of the contract should a policy be issued.
(Attach page with additional information, if needed)

Applicant's Signature: _____ Date: _____

Title: _____ Producing Agent: _____