

# “COMMON ASSURANCE” Umbrella & D&O Programs

## “Quick Quote” Application (For Indication Purposes Only - Not Sufficient to Bind Coverage)

**Direct Submissions To The Program Administrator:**

**McGowan & Company, Inc.**

Home Office – Old Forge Centre  
 20595 Lorain Road  
 Fairview Park, Ohio 44126  
 WATS: (800) 545-1538 / Fax: (440) 333-3214  
[www.mcgowaninsurance.com](http://www.mcgowaninsurance.com)

**Application Submitted By:**

Agent: \_\_\_\_\_  
 Agency: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: (     ) \_\_\_\_\_ - \_\_\_\_\_  
 Fax: (     ) \_\_\_\_\_ - \_\_\_\_\_

**Insured:** \_\_\_\_\_

**Insured's Mailing Address:** \_\_\_\_\_

- Insured Is:**     Condominium Association     Planned Unit Development (PUD)     Cooperative  
                    Single-Family HOA                    Property Owners Association                    Timeshare

**Ratable Exposures:**

1. Number Of Condo/Co-op Units - In Buildings 1-3 Stories: 1. \_\_\_\_\_
2. Number Of Condo/Co-op Units - In Buildings 4-9 Stories: 2. \_\_\_\_\_
3. Number Of Condo/Co-op Units - In Buildings 10 Or More Stories: 3. \_\_\_\_\_
4. Number Of Single-Family Homes Or “PUD” Units: 4. \_\_\_\_\_
5. Number Of Owned Private Passenger Or Light Commercial Vehicles: 5. \_\_\_\_\_
6. Number Of Owned Medium Or Heavy Commercial Vehicles: 6. \_\_\_\_\_
7. (a) Number Of Swimming Pools: \_\_\_\_\_ (b) Are All Pools Fenced With Self-Latching Gates? 7. (b)  Yes  No
8. Number Of Diving Boards: 8. \_\_\_\_\_
9. Lessors Risk Commercial Exposure (Expressed In Amount Of Square Feet): 9. \_\_\_\_\_
10. (a) Are There Any Marina Exposures?  Yes  No  
 (b) Any Gas Docks Or Repair Facilities?  Yes  No  
 (c) If Applicable, Are Marina Facilities Available For Use By Public?  Yes  No  
 (d) # Boat Slips: \_\_\_\_\_
11. Any Lakes, Ponds, Beaches Or Dams Which Are Owned By Or The Responsibility Of The Insured? 11.  Yes  No
12. (a) Are There Any Security Guards?  Yes  No (b) If “Yes,” Are They Armed? 12. (b)  Yes  No
13. If The Association Is A “PUD” Or Single-Family HOA, Are The Streets Public Or Private? 13.  Public  Private  
 If “Private,” What Is The Approximate Mileage Of Owned Roads? \_\_\_\_\_
14. Are There Any Recreational Amenities (i.e. Golf Courses, Tennis Courts, etc.)? 14.  Yes  No
15. Number of Employees of the Association: 15. \_\_\_\_\_

**D&O Exposure:** *Detail The Following Regarding The Applicant:*

1. Had More Than One D&O Claim In The Past (3) Three Years? 1.  Yes  No
2. Been In Existence For Less Than One Year? 2.  Yes  No
3. Is The Developer On The Board Of Directors? 3.  Yes  No
4. Is The Occupancy Rate Less Than 75% 4.  Yes  No
5. Is The Fund Balance Negative? 5.  Yes  No

**Prior Umbrella:**

Carrier: \_\_\_\_\_  
 Limits: \$ \_\_\_\_\_ MM  
 Premium: \$ \_\_\_\_\_ . 00

**Prior D&O:**

Carrier: \_\_\_\_\_  
 Limits: \$ \_\_\_\_\_ MM  
 Premium: \$ \_\_\_\_\_ . 00

**Underlying Program:**

Policy:	Insurer	Limits	Premium:	Policy Period
GL	_____	\$ _____ MM / \$ _____ MM	\$ _____ .00	___/___/___ - ___/___/___
AL	_____	\$ _____ MM	\$ _____ .00	___/___/___ - ___/___/___
EL	_____	\$ _____ k / \$ _____ k / \$ _____ k	\$ _____ .00	___/___/___ - ___/___/___
D&O	_____	\$ _____ MM	\$ _____ .00	___/___/___ - ___/___/___

**Physical Address:** \_\_\_\_\_

**Const. Type:** \_\_\_\_\_ **# Stories:** \_\_\_\_\_ **Year of Const.:** \_\_\_\_\_ **Avg. Unit Val.:** \_\_\_\_\_ **100% Spr.?**  Yes  No