



McGOWAN PROGRAM ADMINISTRATORS
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REAL ESTATE & HOSPITALITY UMBRELLA PROGRAM

Application for Insurance and Risk Purchasing Group Membership

Applicant & General Information Section

Applicant Name: _____

Mailing Address: _____ City, State: _____ ZIP Code: _____

Description of Operations: _____ Effective Dates: _____ - _____

\$1MM \$2MM \$3MM \$5MM \$7MM \$10MM \$15MM \$20MM \$25MM \$50MM \$75MM \$100MM

Expiring Umbrella Carrier: _____ Premium: \$ _____ Limit: \$ _____ MM

NOTE: This application, along with a Schedule of Insured Locations & Named Insureds and any applicable supplementals, is required at binding.

Underlying Insurance Section

NOTE: Underlying binders or declaration pages including schedules of forms, limits, insured locations, and named insureds are required.

Policy Type	Carrier	Limits	Effective Dates
*General Liability		\$ ____ MM occurrence \$ ____ MM aggregate \$ ____ MM prod. & compl. ops.	_____ - _____
*Automobile Liability		\$ ____ MM combined single limit	_____ - _____
**Directors & Officers Liability		\$ ____ MM	_____ - _____
**Employee Benefits Liability		\$ ____ MM / \$ ____ MM	_____ - _____
*Employers Liability		\$ ____ / \$ ____ / \$ ____	_____ - _____
*Liquor Liability		\$ ____ MM / \$ ____ MM	_____ - _____
Other:		\$ ____ MM / \$ ____ MM	_____ - _____

* Policy must be written on an occurrence form basis.

** Policy must be written on a claims-made form basis.

All underlying carriers must be A.M. Best-rated A- / VI or higher. All underlying policies must be written on a commercial lines basis.

Underlying Policy Questions

1. Does the underlying General Liability or Automobile Liability policy provide Hired & Non-Owned Auto. coverage? Yes No
2. Are defense costs outside the limits of liability on the underlying General Liability policy? Yes No
3. Does the underlying General Liability policy apply on a "per location" basis if this is a multiple location risk? Yes No
 - a. If "yes," is the "per location" aggregate capped? Yes No If "yes," what is the cap? \$ ____ MM

Loss Experience Section

NOTE: Three years of currently valued (within six months), carrier-generated loss runs are required for each line of underlying coverage.

New purchase or new construction; therefore, loss runs are not available.

1. Have there been any mold or lead (liability) claims within the past three years? Yes No

Life Safety Section

1. Has a General Liability carrier inspected all locations in excess of three stories within the past three years? Yes No
2. Are there any outstanding mandatory (i.e., critical) loss control recommendations? Yes No
3. Do all buildings comply with property statutes, local and state ordinances, and building codes? Yes No
4. Do any buildings contain aluminum wiring?
 - a. If so, has the wiring been repaired with the COPALUM crimp method? Yes No
5. Do all buildings with interior corridors contain:
 - a. Two means of egress per floor? Yes No
 - b. Lighted exit signs? Yes No
 - c. Emergency lighting that is tested at least once annually? Yes No
 - d. Self-closing fire doors? Yes No
6. Do all buildings with interior stairwells contain:
 - a. At least two fire towers (enclosed stairwells) with self-closing, U.L. Class B fire doors? Yes No
 - b. Emergency lighting that is tested at least once annually? Yes No

High-Rise Building Section (Buildings Eight or More Stories)

Not applicable—all buildings are seven stories or less.

1. Is there an automatic fire detection system that transmits to a central station, fire station, or police station? Yes No
2. Do all buildings contain manual fire alarm systems on each floor?
 - a. Does an audible or visual alarm sound once the alarm is activated? Yes No
 - b. Does the alarm transmit to a central station, fire station, police station, or 24-hour doorman/watchman? Yes No
3. Are all buildings equipped with standpipes? Yes No
4. If there is a restaurant on the top floor of any building, is the restaurant 100% sprinklered and up to code? N/A Yes No

Hold Harmless Section

Third Party Contract Section

All applicants must answer the below questions.

1. Does the applicant obtain written contracts from all service providers hired to work on their premises? Yes No
If “yes,” under those contracts, is the applicant:
 - a. Held harmless by and indemnified for the acts of said service providers? Yes No
 - b. Provided “additional insured” status under said service providers’ liability insurance? Yes No
 - c. Provided certificates of insurance evidencing at least \$1MM in liability insurance? Yes No

Leased Space Section

Not applicable—there is no leased space.

1. Does the applicant obtain written leases from all tenants that:
 - a. Require tenants to carry at least \$1MM in General Liability limits? Yes No
 - b. Require that the applicant be named as an additional insured on the tenants’ liability policies? Yes No
 - c. Contain language that indemnifies and holds harmless the applicant? Yes No
 - d. Contain a waiver of subrogation in favor of the applicant? Yes No
 - e. Specify that the tenant’s insurance is primary to the applicant’s? Yes No

Marina Exposures Section

Not applicable—there are no marina exposures.

1. Please indicate whether the applicant owns or maintains any of the following exposures:

- | | | |
|---|---|-------------------------------------|
| <input type="checkbox"/> Beaches | <input type="checkbox"/> Boat Slips | <input type="checkbox"/> Dams |
| <input type="checkbox"/> Docks or Piers | <input type="checkbox"/> Lakes or Ponds | <input type="checkbox"/> Watercraft |

2. If any of the above exposures apply, are any available for public use? Yes No

If "yes," please describe: _____

3. Are there any gas docks or marina repair facilities? Yes No

NOTE: Additional information is required for dams, docks/piers, and lakes/ponds. Please complete a "Marina Exposures Supplemental."

Security Guards Section

Not applicable—there are no security guards.

1. Are the security guards armed? Yes No

a. If "yes," how many armed guards? _____

2. Are the security guards employed by the applicant or by a third party? Applicant Third Party

If "third party," does the applicant obtain written contracts that: N/A

a. Contain hold harmless agreements? Yes No

b. Require "additional insured" status under said security guards' liability insurance? Yes No

c. Require certificates of insurance evidencing at least \$1MM in liability insurance? Yes No

Vacant Land Section

Not applicable—there is no vacant land exposure.

1. Is the vacant land fenced? Yes No

2. Are there any plans for construction or development within the next 12 months? Yes No

3. Is the applicant aware of any unauthorized third party access? Yes No

4. Does the applicant lease the land to third parties (e.g., cattle ranchers or farmers)? Yes No

Miscellaneous Exposures Section

1. Are any buildings on the schedule currently undergoing ground-up construction? Yes No

2. Is there a valet service at any location? Yes No

3. Are there any owned vehicles? Yes No

4. Does the applicant own any parking facilities that are open to the general public or leased to a third party? Yes No

5. Is the applicant, or are any subsidiaries of the applicant, a non-profit organization? Yes No

6. Does this applicant have any subsidiaries with operations different than their own? Yes No

Uninsured and Underinsured Motorists Liability Coverage Selector

- I decline to purchase Uninsured and Underinsured Motorists Liability coverage. I understand that I or the organization I represent will have no Uninsured or Underinsured Motorists Liability coverage.
- I would like to purchase Uninsured and Underinsured Motorists Liability coverage. I understand that I or the organization I represent will be surcharged for this coverage. Coverage is only available in the following states: FL, LA, NH, VT and WV.

Terrorism Coverage Selector

- I decline to purchase Certified "Acts of Terrorism" Coverage. I understand that I or the organization I represent will have no Certified "Acts of Terrorism" coverage.
- I would like to purchase Certified "Acts of Terrorism" Coverage. I understand that I or the organization I represent may be surcharged of our ordinary premium for this coverage.

Fact, Statements, & Fraud Notice; Purpose & Effect of Application for Insurance & Purchasing Group Membership, Terms & Conditions of Insurance, Membership Agreement - Terms & Conditions of Membership (Including Purchasing Group Fee Disclosure); Disclosure Pursuant to Terrorism Risk Insurance Act of 2002 (And Any Subsequent Continuations or Revisions Thereof)

Fact Statements & Fraud Notice. The Undersigned Insurance Broker And Applicant Declare That To The Best Of Their Knowledge And Belief And Warrant That The Statements Set Forth Herein Are True. The Undersigned Further Declares That Any Occurrence Or Event Taking Place Prior To The Effective Date Of The Insurance Applied For Which May Render Inaccurate, Untrue, Or Incomplete Any Statement Made Will Immediately Be Reported In Writing To The Insurer And The Insurer May Withdraw Or Modify Any Outstanding Quotations And/Or Authorization Or Agreement To Bind The Insurance. The Insurer Is Hereby Authorized, But Not Required, To Make Any Investigation And Inquiry In Connection With The Information, Statements, And Disclosures Provided In This Application. The Decision Of The Insurer Not To Make Or To Limit Any Investigation Or Inquiry Shall Not Be Deemed A Waiver Of Any Rights By The Insurer And Shall Not Stop The Insurer From Relying On Any Statement In This Application In The Event The Policy Is Issued. Any Person Who Knowingly And With Intent To Defraud Any Insurance Company Or Other Person Files An Application For Insurance Containing False Information Concerning Any Material Fact Thereto, Or Conceals Information For The Purpose Of Misleading, Commits A Fraudulent Insurance Act, Which Is A Crime.

Purpose & Effect Of "Application For Insurance & Purchasing Group Membership." By Signing This "Application For Insurance & Purchasing Group Membership" (Hereinafter "Application"), Applicant Agrees: (1) To Become A Member Of Community Associations PG, Inc. (Hereinafter "PG"); (2) To Participate In A Program Of Insurance Designed Exclusively For The Members Of PG; (3) To Accept, Abide By, And Be Bound By The "Terms & Conditions Of Insurance" Posted At www.purchasinggroups.com; (4) To Accept, Abide By, And Be Bound By The "Membership Agreement – Terms & Conditions Of Membership" Posted At www.purchasinggroups.com; (5) To Pay All Premiums (Including Audit And Additional Premiums, If Applicable), Fees (Including Broker & Purchasing Group Membership Fees), And State & Federal Taxes & Surcharges When Due (If Applicable) [Premiums, Fees, Taxes & Surcharges Will Be Individually-Detailed On Applicant's Policy &/Or "Evidence Of Insurance & Purchasing Group Membership" (hereinafter "EOI")]; (6) That It Understands And Agrees That Any Additional Material Supplied By Applicant's Insurance Broker To The Managing General Underwriter For A Given Program Of Insurance Becomes A Material Part Of This Application For Insurance; (7) That It Understands And Agrees That This Application Shall Be The Basis Of The Contract Should A Policy &/Or EOI Be Issued, Whether Or Not It Is Attached To The Policy &/Or EOI; And, (8) That It Understands And Agrees That This Application Will Become A Material Part Of The Policy &/Or EOI, Whether Or Not It Is Attached To The Policy &/Or EOI.

Disclosure Pursuant To Federal Law Regarding Purchasing Groups [15 U.S.C. §3901, Et Seq.] PG Is A "Purchasing Group," As Defined Under Federal Law, Formed To Purchase Liability Insurance On A Group Basis For Its Members To Cover The Similar Or Related Liability Exposure(s) To Which The Members Of PG Are Exposed By Virtue Of Their Related, Similar, Or Common Business Or Service. Members Do Not Share Limits And Each Member Is Provided With Its Own Policy &/Or EOI.

Disclosure Pursuant to Terrorism Risk Insurance Act of 2002 (And Any Subsequent Continuations or Revisions Thereof). By Signing Below, Applicant Agrees That It Has Read And Understands The Most Recent Disclosure Pursuant to Terrorism Risk Insurance Act Which Appears At www.purchasinggroups.com.

To Learn More. Please Visit www.purchasinggroups.com, Which Contains More Information About Your Purchasing Group—And Purchasing Groups In General—As Well As Your Insurance Coverage, Premiums, Fees, Taxes, The MGU's Income, And Your Insurance Broker's Income.

(Version v2015.01.01)

_____, 20____
Signature of Applicant Date

Printed Name: _____

Title: _____

_____, 20____
Signature of Insurance Broker Date

Printed Name: _____

Title: **Insurance Broker**