



## PROPERTY MANAGERS SUPPLEMENTAL APPLICATION

1. Please complete the appropriate sections stating the annual gross fees during the last twelve months.

- a) Real Estate Sales/Brokerage \$ \_\_\_\_\_  
 Number of Transactions \_\_\_\_\_
  - b) Real Estate Property Management \$ \_\_\_\_\_
  - c) Property Development and/or Construction \$ \_\_\_\_\_  
 (Attach detailed description of Operations)
  - d) Real Estate Leasing Services \$ \_\_\_\_\_
- Total Commission/Fees \$ \_\_\_\_\_

2. Indicate the percentage of total fees from the following:

|                          |             |
|--------------------------|-------------|
| <b>Commercial</b>        | %           |
| <b>Residential</b>       | %           |
| <b>Industrial</b>        | %           |
| <b>Agricultural</b>      | %           |
| <b>Undeveloped Land</b>  | %           |
| <b>Other (describe):</b> | %           |
|                          | <b>100%</b> |

3. Is a budget plan prepared for each property managed? Yes    No  
 If NO, explain.

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4. Is firm involved in space merchandising? Yes No  
 If YES, please give details.  
 \_\_\_\_\_  
 \_\_\_\_\_
5. Are credit reports obtained on prospective tenants? Yes No  
 If YES, explain.  
 \_\_\_\_\_  
 \_\_\_\_\_
6. Are you responsible for negotiating, effecting or maintaining Insurance coverage on properties managed? Yes No  
 If YES, explain.  
 \_\_\_\_\_  
 \_\_\_\_\_
7. Are property management contracts/agreements written in accordance with the local jurisdiction of the property? Yes No  
 Attach a sample property management contract/agreement.
8. Does the applicant or any person for whom insurance is being requested have any ownership or equity interest in any property being managed? Yes No  
 If YES, please attach a schedule of such properties and interests.
9. Do you have procedures in place designed to prevent fair housing claims? Yes No  
 If YES, please describe.  
 \_\_\_\_\_  
 \_\_\_\_\_

**It is understood and agreed that this supplemental application shall become a part of the application for Professional Liability Errors & Omissions Insurance.**

**Applicant:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Agent/Broker Name:** \_\_\_\_\_

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, DC, FL, HI, KS, MA, MN, NE, OH, OK, OR, VT or WA; in LA, ME, TN and VA, insurance benefits may also be denied)

IN THE DISTRICT OF COLUMBIA, WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS, IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT.

IN FLORIDA, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

IN KANSAS, ANY PERSON WHO, KNOWINGLY AND WITH INTENT TO DEFRAUD, PRESENTS, CAUSES TO BE PRESENTED OR PREPARES WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, PURPORTED INSURER, BROKER OR ANY AGENT THEREOF, ANY WRITTEN STATEMENT AS PART OF, OR IN SUPPORT OF, AN APPLICATION FOR THE ISSUANCE OF, OR THE RATING OF AN INSURANCE POLICY FOR PERSONAL OR COMMERCIAL INSURANCE, OR A CLAIM FOR PAYMENT OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY FOR COMMERCIAL OR PERSONAL INSURANCE WHICH SUCH PERSON KNOWS TO CONTAIN MATERIALLY FALSE INFORMATION CONCERNING ANY FACT MATERIAL THERETO; OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT.

IN MASSACHUSETTS, NEBRASKA, OREGON AND VERMONT, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, MAY BE COMMITTING A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME AND MAY SUBJECT THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

IN WASHINGTON, IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.