

**ACCIDENT/MADISON INSURANCE COMPANY
 CONDOMINIUM/HOMEOWNERS ASSOCIATION SUPPLEMENTAL APPLICATION**

(USE IN ADDITION TO ACORD APPLICATION)

Applicant's Name: Applicant's Mailing Address:	Agent: Inspection Contact: Phone # for Inspection Contact:
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Type of Entity: Individual Partnership Corporation Joint Venture Other:

GENERAL INFORMATION

Number of: Single Family Units: Condo Units: Townhouse Units: % Owner Occ:
 % Rented: Stories: Miles of Streets Maintained by Association:

GENERAL LIABILITY INFORMATION:

Security:
 Does the Association employ security guards? Yes No. If yes, are guards independent contractors or employees of the association? Employees Independent Contractors. Are the guards armed? Yes No.

Recreational Facilities:
 Any Swimming Pools, Lakes or Ponds? Yes No. If yes, please complete the following applicable section(s):

Pools:

Number of Pools? Answers below apply to all pools.	Is pool completely Fenced from all units? <input type="checkbox"/> Yes <input type="checkbox"/> No
Self-Locking Gates Installed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Does pool have depth markers? <input type="checkbox"/> Yes <input type="checkbox"/> No
Rules Posted? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is there lifesaving equipment in place? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lifeguard on Duty? <input type="checkbox"/> Yes <input type="checkbox"/> No.	Is there a diving board? <input type="checkbox"/> Yes <input type="checkbox"/> No
Any slide(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No	Does Association Sponsor any pool activities? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes above, please provide details:	

Ponds or Lakes:

Number of Lakes or Ponds: . Number of Acres:	Maximum depth of water in deepest area:
Is swimming permitted? <input type="checkbox"/> Yes <input type="checkbox"/> No	Any docks or piers? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is boating/jet skiing permitted? <input type="checkbox"/> Yes <input type="checkbox"/> No	Any watercraft rented? <input type="checkbox"/> Yes <input type="checkbox"/> No

Additional Exposures:

Total number of playgrounds owned by the Association:

What type of material are the playground(s) on (i.e., grass, rubber mats, gravel, etc.)

Any of the following owned by or allowed on Association Property?

<input type="checkbox"/> Volleyball Courts	<input type="checkbox"/> Football Fields
<input type="checkbox"/> Tennis/Racquetball Courts	<input type="checkbox"/> Horseback Riding or Stables
<input type="checkbox"/> Basketball Courts	<input type="checkbox"/> Biking or ATV Trails
<input type="checkbox"/> Baseball or Soccer Fields	<input type="checkbox"/> Jogging Trails. Miles?
<input type="checkbox"/> Aircraft kept or permitted to land and take-off	Other:

This application shall not be binding unless and until confirmation by the Company or its duly appointed representative has been given, and that a policy shall be issued and a payment shall be made, and then only as of the commencement date of said policy and in accordance withal terms thereof. The said applicant hereby covenants and agrees that the foregoing statements and answers are a full and true statement of all the facts and circumstances with regard to the risk to be insured, and the same are hereby made the basis and conditions of the insurance and a warranty on the part of the insured.

Applicant's Signature: _____ Date: _____

Agent's Signature: _____