

/ SUPPLEMENTAL APPLICATION

Vacant Building & Land Supplemental

Vacant or under-renovation buildings and vacant land.

Please complete this supplement in full and return it with a signed ACORD application. Submit to submissions@hedgespecialty.com or through the Hedge broker portal. Answer every question — incomplete applications delay quoting.

GENERAL INFORMATION

NAMED INSURED / APPLICANT

DBA / TRADE NAME

BROKERAGE / BROKER

AGENCY / AGENT

PROPOSED EFFECTIVE DATE

NEW OR RENEWAL?

POLICY / QUOTE NUMBER

FEIN

ENTITY TYPE (LLC, CORP, ETC.)

YEARS IN BUSINESS

YEARS UNDER CURRENT MGMT

EMPLOYEES (FT / PT)

REASON FOR VACANCY / INTENDED FUTURE USE

WEBSITE

MAILING & RISK ADDRESS

MAILING ADDRESS

CITY

STATE

ZIP

COUNTY

OF LOCATIONS

PRIMARY RISK / PREMISE ADDRESS (IF DIFFERENT)

CITY

STATE

ZIP

COUNTY

CONTACTS

PRIMARY CONTACT NAME

TITLE

EMAIL

PHONE

AUDIT / INSPECTION CONTACT

INSPECTION PHONE

INSPECTION EMAIL

CURRENT / EXPIRING CARRIER INFORMATION

CURRENT / EXPIRING CARRIER

POLICY NUMBER

ANNUAL PREMIUM \$

LIMIT(S) OF INSURANCE

DEDUCTIBLE / SIR

RETROACTIVE DATE (IF ANY)

Is the current carrier offering renewal?	YES	NO
Is the expiring / current coverage written on a claims-made basis?	YES	NO

RISK TYPE & ELIGIBILITY

Complete the Building sections for any structure on the risk; complete the Vacant Land section for any unimproved parcel. A single submission may include both.

This submission includes (check all that apply)

☐	Vacant building(s)	☐	Partially-vacant building(s)
☐	Vacant / unimproved land	☐	Building(s) under renovation or construction
1.	Are all buildings locked and secured from unauthorized entry?	YES	NO
2.	Are the buildings free of current damage (fire, windstorm, water, or otherwise)?	YES	NO
3.	Free of any tax or credit lien against the applicant in the past five years?	YES	NO
4.	Are the properties free of foreclosure, receivership, bankruptcy, or bank ownership now or in the past five years?	YES	NO
5.	Are the properties free of any condemnation, or anticipated condemnation, during the policy period?	YES	NO
6.	Is the risk free of any tenant evicted, or being evicted, in the last 60 days?	YES	NO
7.	Are the properties free of any past, pending, or planned bankruptcy or judgment for unpaid taxes against any officer, partner, member, or owner in the past five years?	YES	NO

SCHEDULE OF BUILDINGS

List every building to be covered. Attach a separate schedule if more than four locations.

Per-Building Detail

BUILDING ADDRESS / LOCATION	CONSTRUCTION TYPE	URBAN / SUBURBAN	COMMERCIAL / RESIDENTIAL	INDUSTRIAL / AGRICULTURAL	BUILDING VALUE	SQ. FT.	FOOTING	AGENT SINCE	MONTHS VACANT	REASON FOR VACANT	INTENDED FUTURE USE

Reason-for-vacancy options: foreclosure, settlement of estate, business discontinued, loss of tenant, pending sale, renovation, other.
Future-use options: residential, commercial, industrial, demolition, other.

BUILDING UPDATES

Year of Most Recent Update

UPDATE	BLDG 1 (YEAR / TYPE)	BLDG 2	BLDG 3	BLDG 4
Roof				
HVAC				
Electrical				
Plumbing				
Type of Piping				

DESCRIPTION OF UPGRADES, UPDATES, AND CURRENT BUILDING CONDITION (NOTE ROOF/STRUCTURAL CONDITION)

BUILDING SECURITY & SAFETY

Protections by Building (Y/N)

BUILDING	BOARDED	LOCKED	FENCED	24-HOUR SECURITY	BURGLAR ALARM	FIRE SPRINKLERS	NEIGHBORHOOD (RES/COM/IND)
Building 1							
Building 2							
Building 3							
Building 4							

VISIT / INSPECTION FREQUENCY

VISITED / INSPECTED BY

DAYS VIDEO SURVEILLANCE RETAINED

- | | | | |
|-------------|--|-----|----|
| 8. | Are regular security checks performed? (note by whom above) | YES | NO |
| 9. | Is the surrounding neighborhood stable (i.e., not declining or undergoing rehabilitation)? | YES | NO |
| 10. | Are the utilities presently connected? | YES | NO |
| 11. | If utilities are connected, is heat maintained at 55 degrees or higher?
IF UTILITIES ARE DISCONNECTED, HAVE ALL PLUMBING SYSTEMS BEEN COMPLETELY DRAINED? | YES | NO |
| <div></div> | | | |
| 12. | Is the building sprinklered with a system that is still activated and monitored? | YES | NO |
| 13. | If sprinklered, who inspects the system to confirm it remains operational?
IF THE SYSTEM IS NOT ACTIVATED, HAS IT BEEN COMPLETELY DRAINED? | YES | NO |
| <div></div> | | | |
| 14. | Are functioning smoke and/or heat detectors present in all units and occupancies? | YES | NO |
| 15. | Is an adequate number of serviced fire extinguishers on the premises? | YES | NO |
| 16. | Are there any attractive nuisances (quarry, pit, cave, landfill, mine, vehicle trail, swimming hole, garbage dump)? | YES | NO |
| 17. | Is any building on a historic registry? | YES | NO |
| 18. | Is any location a mobile home? | YES | NO |
| 19. | Is there any government order to vacate or destroy a building? | YES | NO |

IF "YES" TO ANY OF THE ABOVE, EXPLAIN (REFERENCE QUESTION NUMBER)

PARTIALLY-VACANT BUILDINGS

Complete only if any building is not completely vacant.

% OF BUILDING VACANT

OCCUPIED UNITS / TENANTS

OWNER-OCCUPIED? (Y/N)

DESCRIBE ALL OCCUPANCIES (NOTE OWNER-OCCUPIED), WITH CLASS CODE, PREMIUM BASIS, AND AREA FOR EACH

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20.	Is the vacant portion locked and secured from unauthorized entry?	YES	NO
21.	Are functioning smoke and/or heat detectors present in all occupied units and occupancies?	YES	NO
22.	Are all permits obtained as required by law?	YES	NO
23.	Has a valid certificate of occupancy been obtained for each tenant?	YES	NO

RENOVATION / CONSTRUCTION

Complete only if any building will undergo renovation, construction, or demolition during the policy term.

Scope by Building

BUILDING	NATURE OF WORK (REMODEL/COMMERCIAL/INDUSTRIAL/DEMO)	FUTURE USE (RES/COM/IND)	IF RESIDENTIAL — TYPE & # UNITS
Building 1			
Building 2			
Building 3			
Building 4			

EST. COST — NEXT 12 MONTHS \$	EST. COST — ENTIRE PROJECT \$	ESTIMATED COMPLETION DATE

24.	Does any interior demolition need to be done prior to the start of the project?	YES	NO
25.	Does any part of the project involve structural renovations?	YES	NO
26.	Does the project involve bridges, dams, tunnels, bubble buildings, greenhouses, wastewater facilities, airport hangars, silos, chemical/petroleum/energy, co-generation tanks, or radio/TV/communication towers?	YES	NO
27.	Are exterior operations limited to a maximum of four stories or 50 feet from grade level?	YES	NO
28.	If the applicant is a tenant, will business operations be conducted prior to project completion?	YES	NO
29.	Will the applicant occupy the building upon completion?	YES	NO

If the applicant is hiring a licensed and insured general contractor

30.	Will the applicant obtain a written contract from the general contractor (GC)?	YES	NO
31.	Does the contract include a hold-harmless agreement in favor of the applicant?	YES	NO
32.	Will the applicant require the GC to carry equal limits and name the applicant as additional insured?	YES	NO
33.	Does the GC have a minimum of three years' experience conducting renovation projects?	YES	NO

If the applicant is acting as the general contractor

34.	Does the applicant have a minimum of three years' experience conducting renovation projects?	YES	NO
35.	Does the applicant obtain a written contract from all subcontractors?	YES	NO
36.	Does each contract contain a hold-harmless clause in favor of the applicant?	YES	NO

37.	Is the applicant named as additional insured on each subcontractor's general liability policy?	YES	NO
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VACANT LAND

Complete for any unimproved / vacant parcel to be covered.

38.	Are there no construction activities scheduled to occur during the policy term?	YES	NO
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39.	Will no business, recreational, or other activity take place on the land at any time?	YES	NO
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40.	Is the land free of any exposure to landfills, quarries, underground mines, strip mines, caves, wells, or dams?	YES	NO
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41.	Is the land free of any leased operations?	YES	NO
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42.	Is the land free of any residential or business-association common-area status (condominium, homeowners, or business-park association)?	YES	NO
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Schedule of Parcels

PARCEL ADDRESS / LOCATION	VACANT LAND ACRES	LAKE / POND ACRES	ZONING (COM / RES)

PLANS FOR THE LAND AND THEIR TIME FRAME

43.	Has the land ever been used for any other purpose?	YES	NO
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IF YES, DESCRIBE OPERATIONS AND PERIOD OF TIME

44.	Are there any buildings, other structures, equipment, vehicles, or apparatus on the land?	YES	NO
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IF YES, DESCRIBE

45.	Are there any underground fuel tanks on the property?	YES	NO
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IF YES, DESCRIBE

46.	Is there any perceived or known pollution or contamination on the premises?	YES	NO
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IF YES, DESCRIBE

47.	Are there any water exposures (ponds, lakes, streams, creeks, etc.)?	YES	NO
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IF YES, DESCRIBE

48.	Is the land located in a landslide, forest-fire, or brush-fire area?	YES	NO
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49.	Is weed abatement performed regularly?	YES	NO
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IF NO, EXPLAIN

50. Is there any public access to the land? YES NO

IF YES, GIVE DETAILS

51. Are any security measures used to protect the property (fences, signs, etc.)? YES NO

IF YES, DESCRIBE

52. Are 'No Trespassing' signs clearly visible at all entries to the vacant land? YES NO

53. Are 'No Swimming Allowed' signs clearly visible around any lake or body of water? YES NO

54. Does the parcel contain or border any mineral, oil/gas, or timber rights or operations, or is hunting permitted? YES NO

IF "YES" TO ANY OF THE ABOVE, EXPLAIN (REFERENCE QUESTION NUMBER)

COVERAGE REQUESTED

PROPERTY TIV \$

PROPERTY DEDUCTIBLE

CAUSE-OF-LOSS FORM (BASIC / BROAD / SPECIAL)

GL EACH-OCCURRENCE

GL AGGREGATE

VACANT LAND / PREMISES LIABILITY LIMIT

EXCESS / UMBRELLA LIMIT (IF ANY)

REQUESTED EFFECTIVE DATE

LOSS HISTORY

List all claims and losses for the past 3 years, regardless of fault or payment. Attach currently-valued (within 90 days) loss runs for all lines.

55. Has the applicant had any claims, losses, or incidents in the past 3 years? YES NO

56. Are there any known incidents, facts, or circumstances that may result in a claim? YES NO

57. Has any coverage been declined, cancelled, or non-renewed in the past 5 years? YES NO

Loss Detail

DATE OF LOSS	LINE / COVERAGE	CLAIMANT	DESCRIPTION	PAID \$	RESERVED \$	STATUS (O/C)

APPLICANT STATEMENT & SIGNATURE

Any person who knowingly and with intent to defraud any insurance company or other 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 such person to criminal and civil penalties (in some states a fine and/or imprisonment). The applicant represents that the statements and answers given are true, complete, and accurate to the best of their knowledge and will be relied upon by the insurer. Completion of this application does not bind coverage.

		DATE	
SIGNATURE OF APPLICANT			
PRINTED NAME		TITLE	
PRODUCER / AGENCY		HEDGE SUBMISSION #	