

DRAPER AND KRAMER AGENCY CORPORATION

Insurance and Risk Management Services

CONDOMINIUM APPLICATION

Account Name: _____

Mailing Address: _____

Location Address: _____

Total Building Values: _____

Effective Date: _____

Total Personal Property Values: _____

Life Safety

Sprinklered	Yes	No
Unit Smoke Det's Hard-Wired	Yes	No
Common Area Smoke Det's Hard-Wired	Yes	No
Unit/Common Area Smoke Det's Batt-Op	Yes	No
Manual Pull Fire Alarms	Yes	No
Central Station Alarm	Yes	No
Annunciator Panel	Yes	No
Standpipes	Yes	No
Self-Closing Doors - Units	Yes	No
Self-Closing Doors - Hallways	Yes	No
Minimum 2 Exits Per Floor	Yes	No
Enclosed Stairwell	Yes	No
Emergency Lighting	Yes	No
Illuminated Exit Signs	Yes	No
Formal Evacuation Emergency Plan	Yes	No
Fire Extinguishers	Yes	No
Any Current Building Code Violations?	Yes	No

If partial, explain _____

Tied to Annunciator Panel?	Yes	No
Tied to Annunciator Panel?	Yes	No

Building Data

Year Built	_____
Year Converted to Condo	_____
Construction Type	_____
# of Buildings	_____
# of Stories	_____
# of Units	_____
Total Bldg. Square Feet	_____
# of Elevators	_____
# of Boilers	_____
# of Heating Boilers	_____
# of Process Boilers	_____
Commercial Space*	Yes No
If yes, Comm'l Sq. Footage	_____
Type of Comm'l Tenants:	_____

*Is there any split ownership in the building? Yes No
If yes, please explain _____

*Who insures the comm'l space? _____

Year of Major Rehab or Updates

Electrical Updated	_____
Plumbing Updated	_____
Heating/AC Updated	_____
Roof Updated	_____

Recreational

Pool	Yes	No
If Yes:		
# of Pools	_____	
Indoor or Outdoor	_____	
Life Guards	Yes	No
Rules / Depth Posted	Yes	No
Diving Board	Yes	No
Slide	Yes	No
Fenced	Yes	No
Playground	Yes	No
Exercise Room	Yes	No
Recreation Room	Yes	No
Day Care Facility	Yes	No
Jacuzzis/Saunas	Yes	No
Ponds	Yes	No
If Yes:		
# of Ponds	_____	
Type of Pond (retention or detention)	_____	
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Tennis Courts	Yes	No
Golf Course	Yes	No
Marina Slips	Yes	No
Fireplaces	Yes	No
Balconies	Yes	No
If yes, # of Balconies	_____	

Other / Miscellaneous

Parking Garage	Yes	No
If yes:		
Parking Garage Sq. Ft	_____	
Indoor or Outdoor	_____	
Valet or Self-Park	_____	
Guards	Armed / Unarmed / None	
Doorman	FT / PT / None	
Security Cameras	Yes	No
Building Intercom System	Yes	No
Key Card Entry	Yes	No
Receiving room for parcels	Yes	No
Annual Income (Rents)	\$ _____	
Average Unit Value	\$ _____	
Annual Payrolls		
Clerical	\$ _____	
Maintenance/Doormen	\$ _____	
Other	\$ _____	
# of Employees	_____	
# of Board Members	_____	
FEIN	_____	
(Federal Employment Identification Number)		
% Sold Units	_____%	
% Total Occupancy	_____%	
% Owner Occupied	_____%	
If allowed, % Rental	_____%	

Other Special Features / Exposures / Insurance Requirements, etc:

****In order to obtain a quote, please forward this completed application along with 3-5 years loss run history to the following address or fax number:***

ATTN: Jennifer Barry
 Draper and Kramer Agency Corporation
 33 West Monroe Street, Suite 1900
 Chicago, IL 60603

Direct Line (312) 795-2230 Fax Line (312) 541-1224