BOARDING & ROOMING HOUSE SUPPLEMENTAL

Covers boarding houses, rooming houses, single-room-occupancy (SRO) buildings, and co-living homes that rent rooms to unrelated residents. Sober living homes use CWCO-SUP-SOBER; homes providing care use the HLTH family. Complete with ACORD 125, 126, and 140. Attach the rooming house license and house rules.

1 APPLICANT / BUSINESS INFORMATION

LEGAL NAME OF OWNER / OPERATOR	DBA	FEIN	YEARS OPERATING

MAILING ADDRESS	CITY / STATE / ZIP	WEBSITE / LISTING

Applicant is (check all that apply):

☐ Property owner ☐ Operator leasing the building ☐ Co-living company

PRIMARY CONTACT / TITLE	PHONE	EMAIL

2 OPERATIONS

LOC #	ADDRESS, CITY, STATE	YEAR BUILT	SLEEPING ROOMS	MAX RESIDENTS	SHARED KITCHENS	SHARED BATHS

ROOMING HOUSE LICENSE / CERTIFICATE OF OCCUPANCY NO(S).	TYPICAL LENGTH OF STAY

Residents include (check all that apply):

☐ Working adults ☐ Students ☐ Seniors ☐ People in recovery ☐ People referred by agencies ☐ Travelers / short stays

2-1 Is a manager or resident manager on site daily? ☐ Yes ☐ No
IF YES, EXPLAIN

2-2 Are meals provided to residents? ☐ Yes ☐ No
IF YES, EXPLAIN

2-3 Does the applicant provide any personal care, supervision, or medication help to residents? ☐ Yes ☐ No
IF YES, EXPLAIN

If yes to 2-3, the home may require a care license; complete the HLTH family supplemental instead.

3 EXPOSURE & RISK QUESTIONS — FIRE, LIFE SAFETY & CODE COMPLIANCE

In 2025 a D.C. landlord was convicted of second-degree murder after a fire at his unlicensed rooming house killed two people; rooms lacked windows and smoke alarms didn't work. Rooming-house fires repeatedly involve missing sprinklers, single exits, and doors that don't close.

3-1 Does every location hold the rooming house license or certificate of occupancy the local code requires? ☐ Yes ☐ No
IF YES, EXPLAIN

3-2 Are smoke alarms interconnected so an alarm anywhere sounds throughout the building? ☐ Yes ☐ No
IF YES, EXPLAIN

3-3 Does every sleeping room have a working smoke alarm, tested at least monthly? ☐ Yes ☐ No
IF YES, EXPLAIN

3-4 Does every floor have at least two exits, never locked, chained, or blocked from inside? ☐ Yes ☐ No
IF YES, EXPLAIN

3-5 Does every sleeping room have a window or door that allows emergency escape? ☐ Yes ☐ No
IF YES, EXPLAIN

3-6 Are the buildings protected by automatic sprinklers? ☐ Yes ☐ No
IF YES, EXPLAIN

3-7 Are cooking appliances, hot plates, and space heaters prohibited in sleeping rooms? ☐ Yes ☐ No
IF YES, EXPLAIN

3-8 Are room and stair doors self-closing and self-latching? ☐ Yes ☐ No
IF YES, EXPLAIN

3-9 Are self-closing doors checked at least monthly, with defects fixed within 24 hours? ☐ Yes ☐ No
IF YES, EXPLAIN

3-10 Has the fire marshal inspected each location within the last year? ☐ Yes ☐ No
IF YES, EXPLAIN

3-11 Are there currently no open fire-code violations at any location? ☐ Yes ☐ No
IF YES, EXPLAIN

3-12 Has any location had a fire or a fire-code citation in the last 10 years? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — RESIDENTS, CONDUCT & SECURITY

4-1 Are prospective residents screened with a written application and consistent criteria? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Does every resident sign written house rules covering guests, drugs, alcohol, and weapons? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 Does each sleeping room have its own lock? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Are room locks rekeyed or changed between residents? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Are master keys stored securely, with a log of who holds them? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Do cameras cover entrances and common areas? ☐ Yes ☐ No
IF YES, EXPLAIN

4-7 Have there been assaults, overdoses, or police calls at any location in the last 3 years? ☐ Yes ☐ No
IF YES, EXPLAIN

5 EXPOSURE & RISK QUESTIONS — TENANCY, FAIR HOUSING & SANITATION

5-1 Are residents removed only through the legal eviction or lodger-removal process, with no lockouts? ☐ Yes ☐ No
IF YES, EXPLAIN

5-2 Are fair housing rules followed in advertising, screening, and house rules? ☐ Yes ☐ No
IF YES, EXPLAIN

5-3 Are shared kitchens and bathrooms cleaned on a set schedule? ☐ Yes ☐ No
IF YES, EXPLAIN

5-4 Is there a pest control contract that includes bed bug response? ☐ Yes ☐ No
IF YES, EXPLAIN

5-5 Has a resident brought a claim over eviction, discrimination, habitability, or pests? ☐ Yes ☐ No
IF YES, EXPLAIN

6 RENTS, VALUES & PAYROLL

ANNUAL GROSS RENTS ($)	TOTAL INSURED BUILDING VALUES ($)	ANNUAL PAYROLL ($)

7 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

CURRENT PROPERTY / GL CARRIER	CURRENT GL LIMITS	ASSAULT & BATTERY COVERAGE? (Y / N)

7-1 Has any carrier declined, cancelled, or non-renewed coverage in the last 5 years? ☐ Yes ☐ No

IF YES, EXPLAIN

DATE OF LOSS	DESCRIPTION	TOTAL INCURRED ($)	OPEN / CLOSED

7-2 Is the applicant aware of any incident, complaint, or circumstance not yet resulting in a claim that could reasonably give rise to one? ☐ Yes ☐ No

IF YES, EXPLAIN

8 RISK MANAGEMENT

8-1 Is there a written fire-evacuation plan posted in every building, with residents told how to use it? ☐ Yes ☐ No

IF YES, EXPLAIN

8-2 Are electrical systems inspected by a licensed electrician at least every 3 years? ☐ Yes ☐ No

IF YES, EXPLAIN

9 SIGNATURE & FRAUD WARNING

The undersigned declares that the statements and answers given in this supplemental are true, complete and correct to the best of their knowledge, and that no material fact has been withheld or misstated. The applicant agrees that this supplemental, together with all ACORD applications and attachments, forms the basis of any submission to insurers and may be relied upon by them. Signing this supplemental does not bind coverage. This supplemental is an intake document prepared by Cory Washington & Co. LLC to support carrier submission; it does not itself provide coverage.

FRAUD NOTICE: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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. (State-specific fraud warnings apply; see state amendatory notice.)

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)	TITLE	DATE

PRODUCER — CORY WASHINGTON & CO. LLC	PRODUCER SIGNATURE (TYPE FULL NAME)	DATE