

For owners of fully or partially vacant buildings — between tenants, for sale, under renovation, awaiting demolition, foreclosed, or inherited. Vacant land uses CWCO-SUP-VACLAND.  
Complete one form per building with ACORD 125 and 140. Attach recent photos of all sides and the interior, and any renovation contract.

## 1 APPLICANT / OWNER INFORMATION

|                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|
| LEGAL NAME OF OWNER  | DBA                  | FEIN                 | YEARS OWNED          |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| MAILING ADDRESS      | CITY / STATE / ZIP   | EMAIL                |                      |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |                      |

**Owner type:**  
☐ Individual    ☐ LLC    ☐ Corporation    ☐ Partnership    ☐ Trust / estate    ☐ Lender (REO)

|                         |                      |                            |
|-------------------------|----------------------|----------------------------|
| PRIMARY CONTACT / TITLE | PHONE                | INSPECTION CONTACT / PHONE |
| <input type="text"/>    | <input type="text"/> | <input type="text"/>       |

|                      |                          |
|----------------------|--------------------------|
| BUILDING ADDRESS     | MORTGAGE HOLDER (IF ANY) |
| <input type="text"/> | <input type="text"/>     |

## 2 BUILDING & VACANCY

**This building is:**  
☐ Fully vacant    ☐ Partially vacant    ☐ Under renovation    ☐ Awaiting demolition

**Building details:**  
 Year built     Stories     Square feet     % vacant     Building value (\$)     Contents value (\$)

|                      |                       |                      |
|----------------------|-----------------------|----------------------|
| CONSTRUCTION TYPE    | PRIOR OCCUPANCY / USE | VACANT SINCE (DATE)  |
| <input type="text"/> | <input type="text"/>  | <input type="text"/> |

**WHY THE BUILDING IS VACANT, AND THE PLAN AND TIMELINE (SELL, LEASE, OCCUPY, RENOVATE, DEMOLISH)**

**2-1** Is there a government order to vacate, repair, or demolish the building? ☐ Yes ☐ No  
 IF YES, EXPLAIN

**2-2** Are there back taxes, liens, or a pending foreclosure on the property? ☐ Yes ☐ No  
 IF YES, EXPLAIN

## 3 EXPOSURE & RISK QUESTIONS — FIRE, ARSON & SECURITY

Vacant buildings have about 31,000 fires a year, and 43% are set on purpose. Many property policies also cut coverage after 60 days vacant — excluding vandalism and reducing other losses by 15%.

**3-1** Are all doors, windows, and openings locked, boarded, or otherwise secured? ☐ Yes ☐ No  
 IF YES, EXPLAIN

**3-2** Is the building inspected at least weekly, with a log kept of each visit? ☐ Yes ☐ No  
 IF YES, EXPLAIN

**3-3** Is there a monitored alarm, cameras, or a security patrol? ☐ Yes ☐ No  
 IF YES, EXPLAIN

**3-4** Have all trash, debris, and combustible materials been removed? ☐ Yes ☐ No  
 IF YES, EXPLAIN

**3-5** Have there been signs of trespassers, squatters, break-ins, or vandalism? ☐ Yes ☐ No  
 IF YES, EXPLAIN

**3-6** Is the building sprinklered, and is the system kept active and inspected? ☐ Yes ☐ No  
 IF YES, EXPLAIN

3-7 Is there knob-and-tube or aluminum wiring, or an electrical service over 40 years old? ☐ Yes ☐ No  
IF YES, EXPLAIN

3-8 Are copper pipe, wiring, or fixtures at risk of theft (for example, already partly removed)? ☐ Yes ☐ No  
IF YES, EXPLAIN

#### 4 EXPOSURE & RISK QUESTIONS — UTILITIES, WATER & RENOVATION

4-1 Are utilities connected? ☐ Yes ☐ No  
IF YES, EXPLAIN

4-2 Is heat kept at 55°F or higher in cold months? ☐ Yes ☐ No  
IF YES, EXPLAIN

4-3 If utilities are off, has the plumbing been completely drained and winterized? ☐ Yes ☐ No  
IF YES, EXPLAIN

4-4 Is there existing damage that has not been fully repaired (roof, water, fire)? ☐ Yes ☐ No  
IF YES, EXPLAIN

4-5 Is a swimming pool, elevator, or other hazard on the premises? ☐ Yes ☐ No  
IF YES, EXPLAIN

4-6 Is renovation underway or planned, and does the contractor carry insurance naming the owner? ☐ Yes ☐ No  
IF YES, EXPLAIN

4-7 If partially vacant, is the vacant part secured from occupied units, with smoke detectors working throughout? ☐ Yes ☐ No  
IF YES, EXPLAIN

RENOVATION COST (\$, ILLUSTRATIVE)

EXPECTED COMPLETION / OCCUPANCY DATE

#### 5 COVERAGE REQUESTED, PRIOR INSURANCE & LOSS HISTORY

Attach currently-valued loss runs for the last 5 years.

**Coverages requested (check all):**

☐ Building (vacant) ☐ Vandalism & malicious mischief ☐ Liability ☐ Builders risk (renovation) ☐ Contents

CURRENT CARRIER

CURRENT LIMITS

EXPIRATION DATE

5-1 Has coverage on this building been declined, cancelled, or non-renewed in the last 3 years? ☐ Yes ☐ No  
IF YES, EXPLAIN

| DATE OF LOSS | DESCRIPTION (FIRE, VANDALISM, THEFT, WATER, INJURY) | TOTAL INCURRED (\$, ILLUSTRATIVE) | OPEN / CLOSED |
|--------------|-----------------------------------------------------|-----------------------------------|---------------|
|              |                                                     |                                   |               |
|              |                                                     |                                   |               |
|              |                                                     |                                   |               |

5-2 Is the applicant aware of any damage, incident, or circumstance not yet reported that could give rise to a claim? ☐ Yes ☐ No  
IF YES, EXPLAIN

6 RISK MANAGEMENT

6-1 Is there a written vacancy plan covering inspections, utilities, and winterizing?

☐ Yes ☐ No

IF YES, EXPLAIN

6-2 Are neighbors or local police given a contact number to report activity?

☐ Yes ☐ No

IF YES, EXPLAIN

7 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        |
| <div></div>                                       | <div></div>                         | <div></div> |
| PRODUCER — CORY WASHINGTON & CO. LLC              | PRODUCER SIGNATURE (TYPE FULL NAME) | DATE        |
| <div></div>                                       | <div></div>                         | <div></div> |