

## New Tenants Policy Worksheet

### Basic Info

Name \_\_\_\_\_ Address \_\_\_\_\_  
Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
Effective Date \_\_\_\_\_ Frame/Masonry \_\_\_\_\_ Year of Construction \_\_\_\_\_  
# of Units in Building \_\_\_\_\_ # Firewalls \_\_\_\_\_  
Claims in last 3 years (describe) \_\_\_\_\_  
Pets (describe) \_\_\_\_\_ Business Use (describe) \_\_\_\_\_  
Contents amount \_\_\_\_\_

### Credits

Non-smoker Credit \_\_\_\_\_ Smoke Detectors \_\_\_\_\_ Fire Extinguishers \_\_\_\_\_ Deadbolts \_\_\_\_\_  
Central Burglar Alarm \_\_\_\_\_ Central Fire Alarm \_\_\_\_\_ Sprinklers (In Unit, In Common Areas) \_\_\_\_\_  
Account Credit \_\_\_\_\_

### Optional Coverages (indicate whether coverages should be included, not included, and any comments)

Valuable Items (Jewelry, Silver, etc) \_\_\_\_\_  
Earthquake \_\_\_\_\_  
Water or Sump Pump Back-up \_\_\_\_\_  
Increased Loss of Use \_\_\_\_\_  
Umbrella Liability Coverage (must be approved by the company) \_\_\_\_\_  
Other \_\_\_\_\_  
\_\_\_\_\_

Completed By \_\_\_\_\_ Date \_\_\_\_\_