



RENTED DWELLING QUESTIONNAIRE

Policy Number:

Date:

Broker:

Broker Code:

Insured:

Place of Residence:

Risk Address:

GENERAL INFORMATION

Number of rental units: Are any of the units vacant? Yes No If Yes, indicate #:

Are there working smoke detectors in each rental unit? Yes No

Does each unit have a separate electrical panel? Yes No

Does each unit have a separate entrance? Yes No

Do any of the units share any common areas i.e. kitchen, washroom? Yes No

Is the property being rezoned for redevelopment or are there plans to redevelop? Yes No

What is the duration of the lease or rental agreement? Annual Monthly None

Does the lease or rental agreement require the tenants to carry personal liability insurance? Yes No

Does the tenant(s) operate any business or commercial enterprise from the dwelling? Yes No

MAINTENANCE

Who is responsible for dwelling maintenance?

Is this an absentee landlord? Yes No Is there a property manager? Yes No If Yes, provide details below:

Name of property manager:

Address:

Telephone:

How often is property inspected?

Date of last inspection:

ADDITIONAL COMMENTS

RECENT PHOTOGRAPHS OF FRONT & BACK MUST ACCOMPANY QUESTIONNAIRE