

NEVADA DWELLING FIRE

DP-1 (LOB #55)

DP-3 (LOB #43)

PLEASE PRINT OR TYPE.

**LOUIS T. MASTOS & ASSOCIATES, INC.**

405 MARSH AVENUE

RENO, NV 89509-1516

(775) 786-7742 FAX: (775) 322-1987

APPLICANT / OWNER				PRODUCER			
Name				Agent Name:		GA and Subagent #:	
Address				Sub Agent Address:		Sub Agent Phone #:	
City		State		Zip			
County				POLICY TERM			
Home Phone: ( ) ( ) ( )		Work Phone: ( ) ( ) ( )		From		To	
Occupation				Policy Term: 12 Months			
Employer				Time		AM <input type="checkbox"/> PM <input type="checkbox"/>	
Social Security #		DOB		Suspense No.		Policy No.	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Separated				<b>BINDING COVERAGE:</b> For coverage to begin as requested, the application must be fully completed and signed within 48 hours of the requested effective date. Otherwise, coverage is bound at 12:01 a.m. the day the application is received by the General Agent.			
Spouse's Name							
Spouse's Social Security #		DOB					
Spouse's Occupation							
Spouse's Employer				BILLING / ACCOUNTING INFORMATION			
				Check # _____ Amount of Cash with Application \$ _____			
				<input type="checkbox"/> One Pay <input type="checkbox"/> Two Pay*			
				*Each installment includes a \$6 fully earned service charge.			
LOCATION				<input type="checkbox"/> LIENHOLDER			
Address, if different than above (include city, state, zip and county)				Name		Loan #	
				Address			
				City		State	
GENERAL INFORMATION							
Protection Class	Feet to Fire Hydrant	Miles to Fire Dept.	Roof Type	# of Families	Use		
				<input type="checkbox"/> Owner - Full Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Rental <input type="checkbox"/> Vacant			
Construction Type			Year Built	# of Stories	Square Footage	Date Purchased	Purchase Price
<input type="checkbox"/> Frame <input type="checkbox"/> Masonry <input type="checkbox"/> Other _____							
PRIOR CARRIER: _____				Policy Number: _____			
CLAIMS HISTORY - PAST 3 YEARS:							
Date of Loss _____		Type of Loss _____		Amount of Loss _____			
Date of Loss _____		Type of Loss _____		Amount of Loss _____			
POLICY INFORMATION							
COVERAGES				LIMITS		PREMIUM	
DWELLING				\$		\$	
OTHER STRUCTURES				\$		\$	
PERSONAL PROPERTY				\$		\$	
PREMISES LIABILITY				\$		\$	
DEDUCTIBLE: <input type="checkbox"/> \$250 <input type="checkbox"/> \$500 <input type="checkbox"/> \$1,000 <input type="checkbox"/> \$1,500 <input type="checkbox"/> \$2,500 <input type="checkbox"/> \$5,000				\$		\$	
SURCHARGES/CREDITS/OTHER COVERAGES						\$	
Supplemental Heating Surcharge (Submit a Questionnaire and Photo)						\$	
Vandalism and Malicious Mischief (DP-1 Only)						\$	
Burglary						\$	
Insured 50+ Credit						\$	
POLICY FEE						\$ 10.00	
INSPECTION FEE						\$ 40.00	
Minimum Premium: \$100 / Minimum Earned Premium: \$35						<b>TOTAL PREMIUM:</b>	
						\$	

Application must be completed in full, including reverse side.

**UNACCEPTABLE RISKS – DO NOT SUBMIT**

<i>Any "Yes" Response Makes the Risk Unacceptable!</i>	YES	NO
1. Has the applicant had a foreclosure or repossession in the past 5 years? .....	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the applicant had multiple bad debts or been delinquent in mortgage payments in the past year? .....	<input type="checkbox"/>	<input type="checkbox"/>
3. Has the applicant been convicted of arson, fraud or a felony? .....	<input type="checkbox"/>	<input type="checkbox"/>
4. Is the home without permanently installed water, electricity, and sewage utility services? .....	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the home have existing damage or unsettled losses? .....	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the home vacant, unoccupied, or in foreclosure? .....	<input type="checkbox"/>	<input type="checkbox"/>
7. Is the home a short term vacation rental? .....	<input type="checkbox"/>	<input type="checkbox"/>
8. Is the home in a neighborhood with three or more vacant homes or burned out buildings, or dwelling in an area being condemned due to condition? .....	<input type="checkbox"/>	<input type="checkbox"/>
9. Is the home occupied by more than 4 families? .....	<input type="checkbox"/>	<input type="checkbox"/>
10. Is the home not visible from a road, other neighboring residences and not accessible from a paved road? .....	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the home have kerosene heaters, portable space heaters, heat reclaiming devices, homemade heating devices or any potentially hazardous supplemental heating device? .....	<input type="checkbox"/>	<input type="checkbox"/>
12. Is the primary source of heat in the home a permanently installed space heater or a wood, coal or pellet burning device? .....	<input type="checkbox"/>	<input type="checkbox"/>
13. Does the home have fireplaces or woodstoves that were not installed by a licensed contractor? .....	<input type="checkbox"/>	<input type="checkbox"/>
14. Does the homes have fuses only? .....	<input type="checkbox"/>	<input type="checkbox"/>
15. Is the home not updated to code? .....	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the home built on stilts? .....	<input type="checkbox"/>	<input type="checkbox"/>
17. Is the home or structures used to store flammables or explosive materials? .....	<input type="checkbox"/>	<input type="checkbox"/>
18. Is the home under construction or major renovation? .....	<input type="checkbox"/>	<input type="checkbox"/>
19. Is the home attached to, occupied as, converted from or within 1,000 feet of a commercial risk? .....	<input type="checkbox"/>	<input type="checkbox"/>
20. Is the home next to any burned out or abandoned building? .....	<input type="checkbox"/>	<input type="checkbox"/>
21. Is the home located in an area subject to mudslides or forest fires? .....	<input type="checkbox"/>	<input type="checkbox"/>
22. Is the risk's brush clearance less than 350 feet from the home? .....	<input type="checkbox"/>	<input type="checkbox"/>
23. Is the home located on an island, key, peninsula or within 1,500 feet from any river or body of saltwater? If a flood policy is purchased, the home may be written. (This rule only applies to the DP3 Program) .....	<input type="checkbox"/>	<input type="checkbox"/>

<i>Any "Yes" Response Makes the Risk Unacceptable!</i>	YES	NO
24. Is the home a mobile home, row home, earth home, dome home, log home, straw built home, apartment, townhome or condominium? (Duplexes, Triplexes, and Fourplexes are okay). .....	<input type="checkbox"/>	<input type="checkbox"/>
25. Does the risk have other insurance in force, except insurance which covers perils not insured by this dwelling policy? .....	<input type="checkbox"/>	<input type="checkbox"/>
26. Are there barns of any kind valued over \$5,000 on the premises? .....	<input type="checkbox"/>	<input type="checkbox"/>
27. Are there greenhouses or stables on the premises? .....	<input type="checkbox"/>	<input type="checkbox"/>
28. Does the risk not have a legal title to land upon which dwelling is located? .....	<input type="checkbox"/>	<input type="checkbox"/>
29. Does the home have more than 2 unrelated owners or property sold on a land contract? .....	<input type="checkbox"/>	<input type="checkbox"/>
30. Does the home have more than 2 lien holders? Two lien holders are acceptable if one is a financial institution. ....	<input type="checkbox"/>	<input type="checkbox"/>
31. Does the home have business (client visits or high hazard) activities conducted on the premises? .....	<input type="checkbox"/>	<input type="checkbox"/>
32. Is the applicant renting space in the dwelling for commercial use? .....	<input type="checkbox"/>	<input type="checkbox"/>
33. Does the home have childcare, homecare, lodging or farming activities conducted on the premises? .....	<input type="checkbox"/>	<input type="checkbox"/>
34. Does the premises have activities being conducted on it, such as woodworking, cabinet making, auto repair, chemical processing or is the home attached to a tavern or restaurant? .....	<input type="checkbox"/>	<input type="checkbox"/>
35. Does the premises have 25 or more acres? .....	<input type="checkbox"/>	<input type="checkbox"/>
36. Do any applicants or tenants have horses for personal use? If yes, the risk is eligible for \$25,000 Liability Coverage. ....	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>The following types of risks may <u>not</u> have Liability Coverage added:</i></b>		
37. Is the home titled in the name of a corporation? .....	<input type="checkbox"/>	<input type="checkbox"/>
38. Does the premises have a swimming pool or Jacuzzi that does not have a four-foot fence with a self-locking gate or any swimming pool that has a diving board or slide? .....	<input type="checkbox"/>	<input type="checkbox"/>
39. Is there a trampoline on the premises? .....	<input type="checkbox"/>	<input type="checkbox"/>
40. Is the home without permanently installed steps at all entrances, including decks and patios? .....	<input type="checkbox"/>	<input type="checkbox"/>
41. Does the home with steps or porches, over 2 feet in height, that do not have a railing? .....	<input type="checkbox"/>	<input type="checkbox"/>
42. Do the applicants or tenants board or rent horses? .....	<input type="checkbox"/>	<input type="checkbox"/>
43. Does the applicant own, keep, or shelter any of the following breeds: This includes but is not limited to Akitas, Chows, Dobermans, Great Danes, Pit Bulls, Rottweilers, Wolves or Wolf Hybrids, any mix of these breeds, any animal with a previous bite history or any exotic (snakes, monkeys, etc.) animals? .....	<input type="checkbox"/>	<input type="checkbox"/>

**SUBMIT RISKS TO GENERAL AGENT – DO NOT BIND**

	YES	NO
1. Has the applicant had any loss (property damage or liability) in the past 5 years? If yes, give date of loss, describe the loss and the amount paid to repair the damage. ....	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the applicant had a homeowners/dwelling policy cancelled or non-renewed for underwriting reasons during the past 5 years? .....	<input type="checkbox"/>	<input type="checkbox"/>
3. Has the applicant filed for bankruptcy in the past 5 years? .....	<input type="checkbox"/>	<input type="checkbox"/>
4. Is the applicant unemployed? (Retirees with guaranteed income and disabled persons with a consistent income are considered employed.) .....	<input type="checkbox"/>	<input type="checkbox"/>
5. Has the applicant had a lapse in insurance coverage? (Not applicable to new purchases) .....	<input type="checkbox"/>	<input type="checkbox"/>
6. Was the home built more than 50 years ago? .....	<input type="checkbox"/>	<input type="checkbox"/>
7. Is there business (office type work) activities conducted on the premises? This does not include Home Day Care, which is an Unacceptable Risk. ....	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the home have a wood, coal, or pellet burning device? .....	<input type="checkbox"/>	<input type="checkbox"/>
9. Does the premises have 5 or more acres? .....	<input type="checkbox"/>	<input type="checkbox"/>
10. Is the risk coming out of the State Fair Plan? Submit with 2 photos of the front and rear premises. ....	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the Other Structures Coverage exceeds 30% of Coverage A, or \$30,000, whichever is greater? .....	<input type="checkbox"/>	<input type="checkbox"/>
12. Does the Personal Property Coverage exceeds 40% of Coverage A? .....	<input type="checkbox"/>	<input type="checkbox"/>

USE THIS AREA TO EXPLAIN ANY FURTHER UNDERWRITING INFORMATION, LIST ADDITIONAL APPLICANTS OR LIENHOLDERS, AND FOR GENERAL COMMENTS OR INSTRUCTIONS.

**FAIR CREDIT REPORTING ACT NOTICE:** This notice is given in compliance with the Federal Credit Reporting Act (Public law 91-508). As part of our underwriting procedure, a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.

**PRIVACY POLICY:** I have received and read a copy of the Company's Privacy Policy. By submitting this application, I am applying for issuance of a policy of insurance and, at its expiration, for appropriate renewal policies issued by the Company. I understand and agree that any information about me that is contained in, or that is obtained in connection with, this application of any policy issued to me may be used by the Company to issue, review, and renew the insurance for which I am applying.

**X** \_\_\_\_\_  
MUST BE SIGNED (Signature of Applicant)

Date

**X** \_\_\_\_\_  
MUST BE SIGNED - Signature of Producer

Date