### MASTER PROGRAM APPLICATION

Legal Entity Name:													
Trading as Name:													
Property Address:													
City:						State:				Zip Co	de:		
Contact Name:						Contact	Num	nber:					
Building Value:	\$					Contents	s Val	lue:		\$			
Year Built:					Business Income Limit: (including rental income)				\$				
Stories:					Area of Building:				sq. ft.				
Full-time Employees:						Part-time Employees:							
Federal Employee Identi	fication I	Num	ber (FEIN):			•			•				
Average Occupancy:					%	Average Room Rate:				\$			
Rooms:						Number of Buildings:							
Number of Elevators:						Last Elevator Inspection:			n:				
Annual Receipts:	\$					Room Receipts:				\$			
Liquor Receipts:	\$					Other Receipts (specify):			):	\$			
Years in Business:			Brand:			•			•				
What is the ISO construction? (check box to left)			Frame (1) (Including ven	eer)		Joisted Masonry (2) (Masonry walls, wood roof)			oof)			mbustible (3) lls and roof)	
See page 2 for complete description of ISO classes in order to choose the most accurate selection	Masonry Noncombustible (4) (Masonry walls, me roof)		ible		(wall spraye	) Is, flo d wit	ed Fire Resistive (5) s, floor and roof d with coating, fire ng 1-2 hours)			Fire Resistive (6) (concrete encased steel roof, walls, and floors, fire rating over 2 hours)			
Exterior: (check to left)	Brick Glass (		Concr	ete	Siding		Block	S	tucco	EIFS	Other		
HVAC: (check to left)	Residential Units			Commercial Units				Window Units					
Building Shape: (check to left)	Rectangular				Square					Irregular			
Swimming Pool: (check to left)	None				Indoor					Outdoor			



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These descriptions are used by underwriters in order to determine property insurance premiums. This information is critical. An incorrect classification could result in a substantially higher property rate and premium than should be charged for a correct classification. Building where the exterior walls are wood or other combustible materials, ISO<sub>1</sub> including construction where combustible materials are combined with other Frame materials such as brick veneer, stone veneer, wood iron-clad, stucco on wood Building where the exterior walls are constructed of masonry materials such as adobe, brick, concrete, gypsum block, hollow concrete block, stone, tile or ISO<sub>2</sub> Joisted Masonry similar materials, and where the floors and roof are combustible (disregarding floors resting on the ground) Building where the exterior walls, floors and roof are constructed of, and ISO<sub>3</sub> Noncombustible supported by, metal, asbestos, gypsum or other non - combustible materials Building where the exterior walls are constructed of masonry materials, as ISO<sub>4</sub> Masonry Noncombustible described in %bisted Masonry+above, with the floors and roof of metal or other non - combustible materials Building where the exterior walls, floors and roof are constructed of masonry or ISO<sub>5</sub> Modified Fire Resistive fire resistive material with a fire resistive rating of one hour or more, but less than two hours. Building where the exterior walls, floors, and roof are constructed of masonry or fire resistive materials having a fire resistance rating of not less than two **ISO** 6 Fire Resistive hours Please Describe: Other Is any building over 20 years old? (Please describe any renovations): Is any building under renovation? (Please describe): Is the applicant a builder, developer, or a contractor? (Please describe): Has the applicant completed any building updates with employed personnel? (Please describe): Additional building comments: Please describe the operations on the premises: Clerical: \$ Hotel: \$ Payroll Restaurant: \$ Other (Please describe): \$ If the hotel is part of a franchise operation, please describe and include date of last inspection:



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Does the property contract a staffing firm for employment related activities? (Please describe):	
Does the building have a manual fire alarm?	
Does the building have a central station monitoring system?	
Is the building 100% sprinklered?	
Are smoke detectors hard wired?	
If smoke detectors are not hard wired, are inspection or battery logs maintained and updated monthly?	
Is smoking allowed in any rooms? If so, how many?	
Does the property have any above ground or underground storage tanks? (Please describe):	
Does the property have any cell phone antennas on the property roof or elsewhere on property?	
Are all fire doors rated at least ±one houro?	
Does the building have emergency lighting?	
Are outside egresses available on all floors?	
How many exits are available per floor?	
Does the building have unprotected vertical openings (stairways, elevators, etc.)?	
Does the property have a written evacuation plan?	
Does the building have a sauna?	
If the building has a sauna, is it fully sprinklered?	
Does the applicant have written proof of asbestos removal?	
Has the building sustained wind or earthquake damage? (Please describe):	
Does the applicant have a seasonal exposure? (Please describe):	
Does the applicant have any in - room cooking units? (Please describe):	
Are shower / tub surfaces protected by non - slip surfaces?	
Has the applicant received any code violations in the last three years? (Please describe):	
Has the applicant ever filed for bankruptcy? (Please describe):	
Is the roof flat?	
Is the roof pitched?	
Does the applicant have at least three years of hotel management experience?	



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Does the applicant use card keys in lieu of metal keys?	
Are there any manager receptions, or any other events in which alcohol is served or sold?	
Does the applicant have a spa on the premises? If so, does the applicant own, manage, or require the spa to be an Additional Insured on the policy? (Please describe):	named as
Does the applicant provide any therapeutic or cosmetic services (including massages, facials, or other spa serv (Please describe):	ices)?
Does the applicant provide fitness facilities?	
How many pools does the applicant have?	
If the applicant has a pool, is the pool fenced and secured by a self-locking gate?	
If the applicant has a pool, does the pool have diving boards or slides?	
If the applicant has a pool, is there a lifeguard present at the pool?	
If the applicant has a pool, and there is a lifeguard present, is the lifeguard employed or contracted?	
If the applicant has a pool, is there a %Swim at Your Own Risk+sign posted?	
If the applicant has a pool, what are the hours of operation?	
If the applicant has a pool, are there documented checks for pool water clarity?	
If the applicant has a pool, is an anti-vortex safe pool drain cover installed?	
Please describe the neighboring establishments:	
Is there a playground on the premises?	
Does the applicant provide child care services?	
Does the applicant employ or contract security personnel?	
If they applicant has security guards, are the security guards employed or contracted?	
If they applicant has security guards, are the security guards armed?	
Can any rooms be rented for 30 consecutive days? (Please describe):	
Is there a bar or restaurant on premises? (Please provide a copy of the lease or management agreement)	
Does the applicant provide entertainment? (Please describe):	
Is there a manager on premises or on duty 24 hours per day?	
Are there fine arts on the premises? (Please provide a copy of the schedule):	
Is the property ADA compliant? If so, what percentage?	





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describe):
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Capacity
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Please send all completed documents to:

Bob Barczak

T: 888.433.3553 x624

F: 410.433.3440 Attn: Bob Barczak

bob.barczak@dii-ins.com

