



PERSONAL LINES PROPERTY RENTED DWELLING QUESTIONNAIRE

Insured's Name: _____ Does Insured reside outside of Canada? Yes No

Policy Number: _____ Total # of rental properties owned: _____

Address of property: _____

(include pictures and updates as requested by the rules for the Rented Dwelling Program)

How far does the owner reside from this property? _____

How long has the Insured owned the property? _____ years _____ months Rental Income for the building: \$ _____/year

Is the property for sale? Yes No How long has it been for sale? _____ years _____ months

Who is responsible for overseeing the maintenance of the property? _____

Number of rental units in the building: _____ Is each unit self-contained with a separate entrance? Yes No

Describe: _____

Has the building been converted to accommodate multiple units? Yes No Was this professionally done? Yes No

Describe: _____

Number of tenants in each unit: _____

Indicate the basis of the Rental Lease Agreement: Monthly Yearly Other _____

Do all of the tenants carry fire legal liability insurance? Yes No

Number of units vacant? _____ Since what date? _____

How many tenants have occupied the property in the past 2 years? _____

How often is the property inspected? _____ Date of last exterior inspection: _____ Date of last interior inspection: _____

Is there any unrepaired damage? Yes No Describe: _____

Are there properly functioning Co2 Detectors in each unit? Yes No Are they hardwired? Yes No

Are there properly functioning Smoke Detectors in each unit? Yes No Are they hardwired? Yes No

Claims history for the building: _____

Broker Report:

Has the Broker seen the property? Yes No Exterior only Exterior & Interior Inspection Date: _____

If the building is insured for less than the accepted replacement cost on an Approved Calculator, please provide an explanation.

Does the Broker recommend it as a good risk? Yes No

Broker's Comments: _____

Date report completed: _____

Completed by: _____

Brokerage: _____