

# Vacant Property Supplement

in addition to Acord Property Application

## General Information

Named Insured ----- 1							
Principal Owners							
_____							
_____							
Percent of Building Vacant _____	Age of building _____						
Reason for Vacancy _____							
Date of last Occupancy _____							
Prior Occupancy _____							
Intended use _____							
Expected Date of Occupancy _____							
Any pending appeals to change property zoning?	Yes <input type="checkbox"/> No <input type="checkbox"/>						
<p><i>Renovations are not permitted during the policy period.</i></p> <p><i>Note if renovations are scheduled please contact our Inland Marine Department.</i></p>							
Are Utilities operational ?	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Gas</td> <td style="padding: 2px;">Water</td> <td style="padding: 2px;">Electric</td> </tr> <tr> <td style="width: 50px; height: 20px;"></td> <td style="width: 50px; height: 20px;"></td> <td style="width: 50px; height: 20px;"></td> </tr> </table>	Gas	Water	Electric			
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## Security

Building				If Alarmed specify Type _____
Boarded	Locked	Fenced	Alarmed	
Neighborhood				
Industrial	Residential	Commercial	Rural	
Frequency of building inspection	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly			

## Valuation

RCV _____	Square Footage _____
ACV _____	
Purchase Price -----	Date of Purchase _____

## Financial

Are all real estate taxes paid?	Yes ___ No __
Are all Mortgage obligations fully paid to date ?	Yes ___ No __
Any liens (other than mortgage) against the property?	Yes ___ No __
Is any insured, insured affiliate, or principal in bankruptcy or currently in the process of filing for bankruptcy?	Yes ___ No __

## Loss Information

Any losses at this property in the past 36 months?	Yes ___ No __
Any losses at any other properties owned or managed by the insured in the past 36 months?	Yes ___ No __

The above information is material to WKF&C. Please reference the Acord application is false or fraudulent information.

Applicant Signature -----

Producer Signature -----