

CondoPak

Property & GL for Condominiums & Cooperatives

PROGRAM OVERVIEW

- A.M Best A+ Rated (Excellent) Carrier
- Admitted Coverage
- Available States: AK, AL, CT, DE, GA, IA, IL, IN, KS, KY, MA, MD, ME, MI, MO, MS, MT, NC, ND, NH, NJ, NM, NV, NY, OH, PA, RI, SC, SD, TN, UT, VA, VT, WI, WV, WY
- Competitive Rates
- Exclusive Program

SUBMISSIONS

All submissions should include the following:

- Completed Acord Application
- Completed CondoPak Supplemental Application
- Minimum of 4 years currently valued loss history

All Submissions should be sent to: CondoPak@newempireis.com

PROGRAM ELIBILITY REQUIREMENTS

- Joisted Masonry Construction or Better (No Frame)
 - Condominiums or Cooperatives Only (No Apartments)
 - Total Insured Value up to \$35M (\$15M in NY)
(TIV = Total of Building Limit, Business Income, BPP & Ordinance)
 - Owner-Occupancy at least 75%
 - No Federal Pacific Stab-Lok Breakers; No Aluminum Wiring; No Cartridge Fuses (S-type only)
 - No New Construction or Buildings Coming off a Gut-Rehab
 - No Shingled Roofs
 - No Ongoing Construction or Scaffolding
 - No Coastal Exposures
 - Updates Completed within Past 20 years (including roof replacement)
 - Building must be NC or better construction if mercantile has a commercial cooking exposure
 - No Schools, Houses of Worship, Daycares, Assisted Living, Section 8 Housing, Student Housing, HDFC Buildings, Bars/Nightclubs, Wood burning fireplaces
- * Other Restrictions May Apply

SUPPLEMENTAL APPLICATION FOR COMMUNITY ASSOCIATIONS

(TO BE USED IN CONJUNCTION WITH A COMPLETED ACORD APPLICATION)

PRODUCER INFORMATION

Agency Name		Phone:	
Account Contact		Email:	
Mailing Address:			
City:	State:	Zip Code:	
Inspection Contact:	Name:	Phone:	Email:

INSURED AND MANAGEMENT INFORMATION

Named Insured:		Effective Date:			
Association Type:	CONDOMINIUM <input type="checkbox"/>	COOPERATIVE <input type="checkbox"/>	HOA/PUD <input type="checkbox"/>		
Construction Type:	Joisted Masonry <input type="checkbox"/>	Non-Combustible <input type="checkbox"/>	Masonry Non-Combustible <input type="checkbox"/>	Modified Fire Resistive <input type="checkbox"/>	Fire Resistive <input type="checkbox"/>
Year Built:	Building Square Feet:		# of Floors:		
Has the building been renovated/gut rehabbed? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, what year?					
Years of Building Updates:	Wiring:	Plumbing:	Roof Replacement:		
	Roofing:	Heating:			
Building Limit:		Actual Amount of Business Income/Extra Expense:			
Total Number of Habitational Units:		Of these units, how many are:			
Owner/Occupied:	Rented:	Vacant:	Sponsored/investor owned:	Sublets:	Air BnB:
Expiring Carrier:		Premium:	Target Premium:		
Does your agency control this risk?		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Does the expiring policy have a lead exclusion?		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Has the insured's policy been cancelled or non-renewed in the past three (3) years?		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
If yes, please explain:					
Is the roof constructed of any type of shingles (asphalt, wood, etc.)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Property Manager required to be covered for employee dishonesty?		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
If yes, what are the limits for:		Employee Theft:	Computer/Funds Transfer:	Forgery or Alteration:	

Insuring Requirements: ALL IN WALLS ONLY (*Copy of Bylaws Required)

BYLAWS VALUATION: All CondoPak policies include an Extended Replacement Cost endorsement which requires that the building be insured to full value. The valuation required by the board's bylaws is vital in determining proper value to ensure accurate payment in the case of a claim. Please ensure that you properly interpret the bylaws; incorrect valuation could result in inadequate coverage or paying additional premium for coverage that is not necessary.

ALL IN

Board is responsible for the building, all walls, and all attached fixtures including any improvement and betterments made by unit owners. Results in a higher building limit to account for the added exposure.

WALLS ONLY

Board is responsible for the building structure but nothing beyond the walls in each unit. No coverage is afforded for any fixtures or improvements, which are the responsibility of the individual unit owner. Results in a lower building limit.

Buildings will be valued as "All In" unless "Walls Only" is selected AND confirmed by Bylaws

Select an Enhancement Form:

Coverage	DIAMOND <input type="checkbox"/>	DIAMOND ELITE <input type="checkbox"/>	DIAMOND ULTRA <input type="checkbox"/>
Ordinance B&C (Combined)	\$500,000	\$1,000,000	\$5,000,000
Business Income/Extra Expenses (ALS up to)	\$250,000	\$1,000,000	\$2,500,000
Broad Form Water* (Not included in NY)	\$250,000	\$1,000,000	\$1,000,000
Earth Movement	\$250,000	\$1,000,000	\$5,000,000

SUPPLEMENTAL APPLICATION FOR COMMUNITY ASSOCIATIONS

FIRE/LIFE SAFETY

Adequate means of egress per NFPA guidelines?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Is there emergency lighting?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Fire escapes when required?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Illuminated exit signs?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Smoke detectors located in common areas?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Smoke detectors located in all units?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are smoke detectors hardwired?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If no , is there a battery maintenance plan in effect?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are carbon monoxide detectors installed where required by law?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Is there a minimum of two (2) enclosed stairways? (Where required by NFPA guidelines)			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Is there a standpipe for delivering water to upper floors in case of fire? (Buildings taller than seven (7) stories)			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Fire Alarm type (if applicable):	Manual <input type="checkbox"/>	Central Station <input type="checkbox"/>	None <input type="checkbox"/>		
Is the building sprinklered?	Yes <input type="checkbox"/> _____%	No <input type="checkbox"/>	If partial, where?		
Are sprinklers inspected annually?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
Does the building contain any type of aluminum wiring?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
Electrical:	Circuit Breakers <input type="checkbox"/>	If yes , Federal Pacific? <input type="checkbox"/>	Fuses <input type="checkbox"/>	If yes , S-Type? <input type="checkbox"/>	Other, explain:

ADDITIONAL EXPOSURES

Is this association a primary use association? (i.e., not a time share or short-term rental)		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Are there any commercial tenants?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes , please list:		
Is there any commercial cooking?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
Do any units have balconies?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
If yes , what percentage of total units?		_____%	Is grilling permitted on balconies?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does this location have a pool?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
If yes ,	Fence:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Diving Board:	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Slide:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Safety Drain(s):	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Proper Signage:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Cameras?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Pool depths clearly marked?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Pool Hours of Operation?	
Is there a dock/boat/lake exposure?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Playground?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Clubhouse?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Parks/Trails?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Golf course?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Athletic courts/fields?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Fitness Center?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Daycare on premises?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Tanning Beds?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Spa?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Underground fuel/oil tanks?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
Wood burning fireplaces?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes , are the fireplaces actively in use?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the building have a basement?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes , what is the square footage?		
Is the basement finished?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Description of finished:		
Does the insured maintain parking facilities?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
If yes , what is the square footage?		Outside Parking lot:	Basement Parking:	1 st Floor Lot:	
Are there cameras in the garage/parking area(s)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Is there a GKLL exposure?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the building have an elevator?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
Does the building permit dogs?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes , provide details on any breed or size restrictions in place?		
Is there an EV charging station located on the insured's property?		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
If yes : Where is it located?		Garage (inside building) <input type="checkbox"/>	Outdoor Parking Lot <input type="checkbox"/>	If outdoor, what is the distance between the chargers and the building?	
Are E-Bikes permitted in the building common areas?	Yes <input type="checkbox"/>		No <input type="checkbox"/>		
Are unit-owners/tenants permitted to store E-bikes in their units?	Yes <input type="checkbox"/>		No <input type="checkbox"/>		Not Regulated <input type="checkbox"/>
If unit owners are not permitted to store e-bikes in units, how is this regulated?					

SUPPLEMENTAL APPLICATION FOR COMMUNITY ASSOCIATIONS

RISK MANAGEMENT

Does the Named Insured employ a Property Manager for the building?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , name of property management company:	Onsite <input type="checkbox"/>	Offsite <input type="checkbox"/>
If off-site management, are site visits:	At least weekly <input type="checkbox"/>	Monthly <input type="checkbox"/>
Number of years managing this named insured:	Other <input type="checkbox"/>	
Are background checks performed on employees and tenants?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there a doorman on site?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , provide days and times doorman is on duty:		
Are certificates required when contracting for work to be performed on the building?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are hold harmless agreements in place when contractors are hired to perform work?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the insured require insurance for all commercial tenants (if applicable)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , please attach copies of certificates of insurance for all commercial tenants.	N/A <input type="checkbox"/>	
Does the insured require insurance for all owners/tenants?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the association have a reserve fund analysis for major projects?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there a roof replacement schedule in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has the boiler been inspected in the last year?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the boiler inspected annually?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any open lead violations?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , please explain:		
Are there any open mold violations?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , please explain:		

RISK MANAGEMENT - EXTERIOR

Is there any construction being performed, whether by your association or a neighboring building, that could affect your insurability (including but not limited to façade work, scaffolding, sidewalk repair, etc.)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , describe:		
Who owns and controls the driveway, curb cut, parking lot or courtyard?	N/A <input type="checkbox"/>	Building Owner <input type="checkbox"/>
	Tenant <input type="checkbox"/>	Shared Association <input type="checkbox"/>
Sidewalk Flags (<i>sidewalk flags are the concrete slabs that make up a sidewalk</i>)		
Are any sidewalk flags missing?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are any sidewalk flags cracked and/or loosened?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there a vertical grade differential or spacing between any adjacent sidewalk flags causing a surface defect of one half inch or more?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there an improper slope of a sidewalk flag (<i>a flag that does not drain towards the curb and/or retains water</i>)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any hardware defects in the sidewalk flags (<i>any appurtenances not flush within one half inch of the sidewalk</i>)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there a contract in place for snow removal?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are snow logs maintained?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are any building features (e.g. mats, grates, awnings, stairways) used or altered in a way that opens them to public use or creates a shortcut (e.g. gateway to courtyard or side street)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , describe:		
Has any recent construction or repair work been done on exterior walkways, steps or driveways?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , Who performed the work?		
When was the work completed?		
Was it inspected upon completion?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the property permit any private use of the sidewalk (delivery loading, attached ramps, decorative planters) that goes beyond the typical domestic use?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , describe:		
Tree Pits/Tree Wells:		
Have you made any modifications to the tree wells adjacent to your property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you use the tree wells for any business-related purposes, such as signage or displays?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you performed any maintenance or repairs on the tree wells?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you aware of any issues/hazards related to the tree wells?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , Has the city/county been notified?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have security cameras monitoring sidewalks?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes , how many cameras are currently in use (both interior & exterior)?	How long are videos kept?	

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BOARD INFORMATION

Has the control been transferred to the board from the developer?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there a developer sitting on the board?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have there been any Directors and Officers claims made in the past three (3) years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have there been any Directors and Officers claims paid in the past three (3) years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the property manager have the authority to withdraw funds?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is board approval required for all transactions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Who reconciles bank statements?	How often?	

I hereby warrant, represent and confirm that, to the best of my knowledge, all information provided is complete, true and correct. I understand that any misrepresentation or omission of facts may result in a cancellation of coverage.

 INSURED SIGNATURE

 DATE

 AGENT SIGNATURE

 DATE