

Condominium Unit-Owners (HO6) Application  
**Non Wind & Flood**



Agent:  Ph:	Insured Name & Mailing Address:
Condo Name & Address (Required):	Mortgagee/Additional Insured:

County:	Unit No:	Effective Date:
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Coverage C Personal Property	\$	Limits
Coverage A Dwelling	\$	_____
Coverage E Personal Liability	\$	_____

Endorsements:       Medical Payment                       \$5,000     \$10,000     \$15,000  
                          Water Back-up Sub-Limit     \$5,000     \$10,000

South Carolina Rates Effective 07/01/14					Premium Calculation	
Pers. Prop	Premium	Fee	6% Tax	Total	Premium	\$ _____
10,000	150	25	10.50	185.50	Add'l Coverage Premium	+ _____
15,000	225	25	15.00	265.00	Policy Fee	+ _____
20,000	300	25	19.50	344.50	6% Tax	+ _____
25,000	375	25	24.00	424.00	Total	= _____
30,000	450	25	28.50	503.50		

Occupancy:     Primary     Seasonal     Rented

\*\$30,000 Maximum Limits for Tenant Occupied Units\*

\*\$50,000 Maximum Limits for Owner Occupied Units Only – Call for quote\*

**NO COVERAGE FOR WIND, HAIL, WIND-DRIVEN RAIN, OR FLOOD**

Basic Coverages and Increased Limits Available:

Coverage C – Personal Property:	Amount \$10,000 to \$50,000
Coverage A – Dwelling:	Amount \$5,000 (Add'l limits available at \$10 per \$1,000 plus tax)
Coverage D – Loss Of Use/Rents:	40% of Coverage C
Loss Assessment:	\$1,000 Per Policy Year
Deductible:	\$1,000
Water Back-Up Sub-Limit	\$25 plus tax for \$5,000 Sub-limit; \$45 plus tax for \$10,000 Sub-limit
Coverage E – Personal Liability:	\$300,000 (Add'l \$50 plus tax to increase to \$500,000)
Coverage F – Medical Payments:	\$1,000 (Add'l limits available at \$4 per \$1000 plus tax)

Construction:     Frame/Brick Veneer     Joisted Masonry     Non-Combustible  
                          Masonry Non-Combustible     Fire-Resistive     Other \_\_\_\_\_

Yr. Construction:	Sq. Footage of Unit:	No. of Stories:
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Roof Type: <input type="checkbox"/> Flat <input type="checkbox"/> Gable <input type="checkbox"/> Hip	Protection Class:	Soft Story: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Roof Covering: <input type="checkbox"/> Concrete Fill <input type="checkbox"/> Built-up Roof <input type="checkbox"/> Wood Shingle <input type="checkbox"/> Single Ply Membrane <input type="checkbox"/> Metal Sheathing <input type="checkbox"/> Normal Shingle (55 mph) <input type="checkbox"/> Rated Shingle (110 mph)	Tile: <input type="checkbox"/> Clay <input type="checkbox"/> Concrete
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Improvements/Updates:     Heating yr: \_\_\_\_\_     Electrical wiring (box) yr: \_\_\_\_\_     Plumbing (pipes) yr: \_\_\_\_\_  
                          Roof yr: \_\_\_\_\_     Other: \_\_\_\_\_

Protection Devices:     Sprinkler                      Hurricane Shutters:     Engineered     Plywood     Impact Glass

*Coverage is being provided by Certain Underwriters at Lloyd's, London. Neither the U.S. Brokers that handled this insurance nor the insurers that have underwritten this insurance will disclose non-public personal information concerning the buyer to non-affiliates of the brokers or insurers except as permitted by law.*

Agent _____	Date _____	Applicant _____	Date _____
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