# hullappheader-OR-WAPROPERTY MANAGER SUPPLEMENT

(Include Acord application)

Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Location Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# RESIDENTIAL PROPERTY MANAGEMENT NOT PERMITTED

1. Does the Applicant have any financial interest in any of the properties they manage?

 Yes No

If yes, please provide details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Does the Applicant act as a General Partner for any limited partnerships?

 Yes No

 If yes, please provide details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Does the Applicant form or organize group investments or syndications, i.e., limited partnerships, real estate investment trusts or corporations for the purpose of investing in real estate?

 Yes No

 If yes, please provide details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Is the Applicant involved with property management or construction activities?

 Yes No

 If yes, please provide details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Gross Sales/Fees: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Indicate the percentage of total fees derived from the following:

Commercial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ % Residential \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%

 Industrial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% Agricultural \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%

7. Is a budget prepared for each managed property? Yes No

8. Are you involved in space merchandising? Yes No

9. Are credit reports obtained on prospective tenants? Yes No

10. Are you responsible for negotiation, effecting or maintaining insurance coverage on the

managed properties? Yes No

11. Is the Applicant rendering any services to any regulatory authorities, i.e., RTC, FDIC, FSLIC, OTS?

 Yes No

 If yes, please provide details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please attach a copy of the management contract**.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Signature Producer’s Signature Date