



**COLONY INSURANCE COMPANY**  
**HOTEL/MOTEL PDQ**  
**GENERAL LIABILITY SUPPLEMENTAL APPLICATION**

General Agent Name \_\_\_\_\_

Insured: \_\_\_\_\_ Date: \_\_\_\_\_

**GENERAL INFORMATION**

Year Built: \_\_\_\_\_ When were the following updates performed?  
 Heating: \_\_\_\_\_  
 Electrical: \_\_\_\_\_ Is wiring aluminum?  Yes  No (Aluminum wiring is prohibited)  
 Plumbing: \_\_\_\_\_

**Total # of units: \_\_\_\_\_ How many units have the following exposures? If "Yes", Prohibited**

Undergoing major structural renovations  Yes  No  
 Hourly or Monthly Rental  Yes  No  
 Spaces used as Mobile Home Parks or Courts  Yes  No

**Percentage of units occupied:** \_\_\_\_\_ (Prohibited if less than 60% annually)

**How many stories:** \_\_\_\_\_ If over 4 stories, confirm 100% sprinklered, masonry-non combustibile or better construction, life safety standards are met and elevator maintenance agreement is in place

**Receipts**

Room rental receipts: \$ \_\_\_\_\_ Food receipts: \$ \_\_\_\_\_ Liquor receipts: \$ \_\_\_\_\_  
 Other: \_\_\_\_\_ - If food/liquor, attach Restaurant/Tavern/Bar Supplemental Applications

**LIFE SAFETY & SECURITY**

\_\_\_\_\_ Confirm Fire Extinguishers are adequately placed and service tags are current.  
 \_\_\_\_\_ Confirm security guards are not armed and certificates of insurance obtained. (Armed guards are prohibited)  
 \_\_\_\_\_ Confirm smoke detectors are in each unit. Battery ( ) or Hardwired ( )

**RECREATIONAL FACILITIES**

# \_\_\_\_\_ Baseball diamonds, basketball, racquetball, shuffleboard, tennis or valley ball courts  
 # \_\_\_\_\_ Beach fronts or lakes. Acres of each lake \_\_\_\_\_  
 # \_\_\_\_\_ Bicycle trails Miles of each \_\_\_\_\_  
 # \_\_\_\_\_ Clubhouse – Square footage of Clubhouse \_\_\_\_\_, # Convenience Stores \_\_\_\_\_ # Fitness Centers \_\_\_\_\_  
 # \_\_\_\_\_ Docks, Slips \_\_\_\_\_, Boat ramps \_\_\_\_\_ (Docks and/or slips are prohibited)  
 # \_\_\_\_\_ Marinas (Prohibited)  
 # \_\_\_\_\_ Playgrounds or parks? Acres of parks \_\_\_\_\_  
 # \_\_\_\_\_ Restaurants - If food/liquor attach Restaurant/Tavern/Bar Supplemental Applications  
 # \_\_\_\_\_ Saddle animals for hire (prohibited)  
 # \_\_\_\_\_ Swimming Pools #Saunas \_\_\_\_\_ #Spas \_\_\_\_\_  
 Confirm pools are fenced with self-latching gates  Yes  No  
 Confirm rules, hours and depth markers posted  Yes  No  
 Confirm life safety equipment is available  Yes  No  
 Confirm no slides or diving boards over 1 meter or 3 feet  Yes  No

Describe all losses in the past 3 years: \_\_\_\_\_

Has insurance been canceled or non-renewed in the past year for non compliance of recommendations?  Yes  No

Has applicant filed Bankruptcy (Chapter 7, 11 or 13) or is applicant in receivership?  Yes  No (Prohibited)

**I hereby certify that all information is accurate to the best of my knowledge.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Producer Signature: \_\_\_\_\_ Date: \_\_\_\_\_