## Homeowners / Dwelling Program Application

APPLICANT INFORMATION Occupation Date of Birth Name **Employer Insured Location** (if different than mailing address) City/State/Zip County Mailing Address (if different than insured location City/ State/Zip County **Inspection Contact Phone Number Producer Name Phone Number Prior Carrier Expiration Date Expiring Premium** Effective Date (of this policy) If prior carrier has cancelled or non-renewed, please explain why? (Missouri Applicants need not apply) If the insured has not carried insurance within the last 12 months please explain why? Within the last 5 years has the applicant had (check all that apply): ] Foreclosure ] Bankruptcy ] Repossession 1 Lien Mortgagee (Name/Mailing Address Including Zip Code) Loan # Mortgagee (Name/Mailing Address Including Zip Code) Loan # **Additional Insured** (Name/Address/City/State/Zip) **Describe Interest Grantor, Beneficiary or Trustee** (For Named Insureds that are Trusts, Estates, etc.) **Date of Birth** COVERAGES/LIMITS OF LIABILITY/DEDUCTIBLES **Policy Form** Dwelling/ (A&A HO-6) Other Structures Personal Property Loss of Use Liability **Medical Payments** ] HO-3 1 HO-4 Wind/Hail Deductible ] HO-6 Loss Assessment Ordinance or Law **AOP Deductible** ] Y/N Other Deductible 1 DP-3 Named Storm Deductible [ 1 Y/N (e.g. Water Damage, Theft) (10% included) ] 15% | 125% % [100% if wind peril is excluded] RATING AND UPDATES INFORMATION **Protection Class** #(if PC 9/10, requires supplemental app) Fire Department Distance to Fire Hydrant: feet **Distance to Fire Station:** ] Volunteer ] Paid If dwelling is rented, what Occupancy is the minimum # of days Unoccupied **Secondary Rental** Builders Risk (requires supplemental app) Vacant rented per tenant? **Primary** Secondary Rental ] # of days Construction ] Frame/Stucco ] Masonry Veneer ] EIFS ] Masonry ] Superior ] Log (requires supplemental app) Year Built Square Footage # of Families # of Stories If HO4/6, How many floors in the building? On which floor is the unit? Protective Alarms/Devices ] Smoke Detectors [ ] Interior Sprinklers ] Central Fire ] Central Burglar Windstorm Mitigation ] Hip Roof [ ] Roof Straps [ ] Protective Glass [ ] Metal Electronic Shutters [ ] Metal Manual Shutters [ ] Plywood Shutters Roof Type Roof Update Hip Roof Age of Roof (Year Updated) ] Shake Tile [ | Slate Other: ] Partial ] Yes ] No Was the dwelling gutted and Does the dwelling include any lead Year or building updates Does the dwelling include any fuses or piping as part of the plumbing system? completely remodeled? ] Y knob&tube? [ ] Y [ LOSS HISTORY (Loss History includes all losses within the last 3 years regardless of location) Unrepaired damage Open or Closed **Preventative Measures Date** Type of Loss Cause **Amount** (Y or N)

If yes, explain:   If yes, explain:   If yes, explain:   If yes, explain:   If yes, requires supplemental Builder's Risk app)   Doy on or any tenant that occupies the premises own any animals?   J Y [ JN   Is there a woodstove on premises? [ ] Y [ Type(s): properties   If yes, is it a primary absorbered   JY [ If yes, requires supplemental heating questionnaire)   JY [ If yes, is it a primary absorbered	ADDITIONAL UNDERWRITING INFORMATION (ch	eck all applic					T =			
Is the dwelling undergoing any renovation or construction? [ ] Y [ ] N [ (ive. requires supplemental Builder; Risk. app)   Do you or any tenant that occupies the premises was any animals? [ ] Y [ ] N [ Is there as woodstove on premises? [ ] Y [ ] N [ If yes. requires supplemental builder; Risk. app)   Do you or any tenant that occupies the premises was any animals? [ ] Y [ ] N [ If yes. requires supplemental builder source? [ ] Y [ ] N [ If yes. requires supplemental builder source? [ ] Y [ ] N [ If yes. requires supplemental builder source? [ ] Y [ ] N [ If yes. requires supplemental building septimental beauting questionnairs? [ ] Y [ ] N [ If there is a fix primary heat source? [ ] Y [ ] N [ If the dwelling on the National Historic Register? [ ] Y [ ] N [ If the dwelling on the National Historic Register? [ ] Y [ ] N [ If the dwelling profit of the full value of the Dwelling indicated in the Coverages Initio of Lability section above? [ ] Y [ ] During the last five years, has any applicant and/or person with financial interest in the property to be insured been indicated for or consisted of any degree of the property in the property of the insured been indicated for or consisted of any degree of the property of the insured been indicated for or consisted of the property of the insured been indicated for or consisted of the property of the insured been indicated for or consisted of the property of the insured been indicated for or consisted of the property of the insured been indicated for or consisted of the property of the insured been indicated for or consisted of the property of the insured been indicated for or consisted of the property of the insured been indicated for or consisted of the property of the insured been indicated for or consisted of the property of the fund of the property of the devel in property in the property of the fund of the property of the	Is business conducted on premises? If yes, explain:		[ ]	] Y	[	] N	Is the dwelling for sale?	] <b>Y</b>	[ ]	N
Do you or any tenant that occupies the premises own any animals?	Is the dwelling undergoing any renovation or construct	ion?	[ ]	] Y	[	] N	Is the dwelling rented to students?	] Y	[ ]	N
Specis   Breedist	Do you or any tenant that occupies the premises own a	ny animals?	[ ]	Y	[	] N			[ ]	N
Distance to coast:   Miles   Feet   The State   The							If yes, is it a primary heat source?	] Y		] N
During the last five years, has any applicant and/or person with financial interest in the property to be insured beam indicted for or convicted of any degree crime of Franch pibery, around on any other crime in connection with the property to be insured or any other property?		<u>Y</u> [ ]N	N					] Y	[ ]	] N
crime of fraud, briber, arson or any other crime in connection with the property to be insured or any other property?  [Y]  [California Only:  Is there 150 feet of brush clearance around all structures? [] Y [] N  Is there 150 feet of brush clearance around all structures? [] Y [] N  Is there 150 feet of brush clearance around all structures? [] Y [] N  Is there 150 feet of brush clearance around all structures? [] Y [] N  Is there 150 feet of brush clearance around all structures? [] Y [] Y  OPTIONAL COVERAGES/ENDORSEMENTS  Personal Property Replacement Cost										N
California Only:   Is there 150 feet of brush clearance around all structures?   1Y   1N   Is there 150 feet of brush clearance around all structures?   1Y   1N   Is there 150 feet of brush clearance?   1Y   Is there Fire Retardant Treatment?   1Y   Is therefore A therefore Retardant Treatment?   1Y   Is the formation of the Avelling or other structures of (ii) and other structures of (i							·	-	legree of the	
OPTIONAL COVERAGES/ENDORSEMENTS  Personal Property Replacement Cost Yes No # of properties # occupancy # occupancy # of properties # occupancy # occup	California Only:		•	] N	Califo If Wo	rnia O od Sha	Only: like roof, is there1000 feet of brush clearance?	[	]Y [	] N
Personal Property Replacement Cost   Yes   No   Extending Liability   for properties   occupancy   address   special Personal Property All Risk Coverage   Yes   No   special Computer Coverage   Yes   No   Special Coverage   Yes   Yes   No   Special Coverage   Yes   Yes   No   Special Coverage (States other than CA, OR, WA)   Yes   Y	OPTIONAL COVEDACES/ENDORSEMENTS				18 the	.е гис	Retardant Freatment:	L	<u>] Y                                    </u>	] N
Special Personal Property All Risk Coverage C Yes No Special Computer Coverage Yes No Watercraft Liability Special Computer Coverage Yes No Upgrade to Green Residential Endorsement Yes No Hof Cart Survey Yes Yes No Hof Cart Survey Yes No Hof Cart		Yes	No			_	•			
Special Computer Coverage   Yes   No   Section 1: \$5K [ ] \$10,000 [ ] \$25,000   Yes   No   Include Liability for Golf Carts   Yes   Yes   No   Include Liability for Golf Carts   Yes   Yes   Yes   No   Include Liability for Golf Carts   Yes   Yes   Yes   Yes   No   Include Liability for Golf Carts   Yes   Yes	Special Personal Property All Risk Coverage C	Yes	No		-	-				
Extended Replacement Cost Dwelling  [				- 0	adures	·	·	Yes	No	
Upgrade to Green Residential Endorsement	<b>Extended Replacement Cost Dwelling</b>			١,	Watero	raft Li	iability		-1-	
LexElite Eco-Homeowner    Yes							•			
Personal Injury  Water Back Up and Sump Pump Overflow  [ ] \$5,000 [ ] \$10,000 [ ] \$25,000 Yes No Golf Cart Coverage  [ ] \$55,000 [ ] \$10,000 [ ] \$25,000 Yes No make value year  Increased Special Limits (all)  Yes No Include Liability for Golf Carts  Yes No Include Liability for Golf Carts  Yes No Ho6 All Risk Coverage A  Ves No Ho6 All Risk Coverage A  Ves No Ho6 All Risk Coverage A  Vandalism & Malicious Mischief (DP3 only)  Earthquake Coverage (States other than CA, OR, WA)  Yes No Limited [ ] Deluxe [ ]  If yes to Sinkhole Coverage (Florida Only):  If yes to Earthquake Coverage in CA, OR, WA:  I) Have you observed: (i) the signs of settling, cracking, bulging, sagging, bending, leaning, shrinkage or expansion of any part of the dwelling or other structures or (ii) any other partial or complete sinking or collapse of the dwelling or other structures? [ ]Y [ ]N										
Personal Injury  Water Back Up and Sump Pump Overflow  [ ] \$5,000 [ ] \$10,000 [ ] \$25,000 Yes No Golf Cart Coverage  [ ] \$5,000 [ ] \$10,000 [ ] \$25,000 Yes No Golf Cart Coverage  Increased Special Limits (all)  Yes No Make	LexElite Eco-Homeowner	Yes	No					Yes	No	
Water Back Up and Sump Pump Overflow  [ ] \$5,000 [ ] \$10,000 [ ] \$25,000   Yes   No   #of carts	Personal Injury	Yes	No			٦.		Ves	No	
Increased Special Limits (all)  Yes No Include Liability for Golf Carts  Yes N	Water Back Up and Sump Pump Overflow					art Cov		* * * *		
Increased Special Limits (Jewelry/Watches/Furs)  Increased Special Limits (Jewelry/Watches/Furs)  Include Liability for Golf Carts  Yes  No  HO6 All Risk Coverage A  Yes  Pet Critical Injury Coverage  # Dogs [ ] # Cats [ ]  Vandalism & Malicious Mischief (DP3 only)  Yes  No  Section I: \$5K [ ] \$10K [ ] \$25K [ ]  \$50K [ ]  Section I: \$5K [ ] \$10K [ ] \$25K [ ]  Sook [ ]  Sinkhole Coverage (Florida Only)  Yes  No  If yes to Sinkhole Coverage (Florida Only):  If yes to Earthquake Coverage in CA, OR, WA:  I) Have you observed: (i) the signs of settling, cracking, bulging, sagging, bending, leaning, shrinkage or expansion of any part of the dwelling or other structure or (ii) any depression in the ground surface on the premises? [ ]Y [ ]N  2) Have you been told, has it been disclosed to you or are you otherwise aware of: (i) a sinkhole that might affect the dwelling or other structures or (ii) any other partial or complete sinking or collapse of the dwelling or other structures? [ ]Y [ ]N  3) At any time, has this property had any prior sinkhole claims?	[ ] \$5,000 [ ] \$10,000 [ ] \$25,000	Yes	No	#	# of car	rts	valueyear			
Identity Fraud   Yes   No   HO6 All Risk Coverage A   Yes   No   Pet Critical Injury Coverage   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Earthquake Coverage (States other than CA, OR, WA)   Yes   No   Yes   No   Yes   No   Yes   No   Injury Coverage   Yes   No   Yes   No   Yes   No   Earthquake Coverage (States other than CA, OR, WA)   Yes   No   Yes   No   Injury Coverage   Yes   No   Yes   No   Yes   No   Injury Coverage   Yes   No   Yes   No   Yes   No   Injury Coverage   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Injury Coverage   Yes   No   Injury Coverage   Yes   No   Yes	Increased Special Limits (all)	Yes	No	<u> </u>	make_		modelserial #	Yes	No	1
Directors & Officers Coverage  Limited Fungi (Mold), Wet or Dry Rot Coverage  Section I: \$5K[] \$10K[] \$25K[] Yes No  Section II: \$5K[] \$10K[] \$25K[] Yes No  Sinkhole Coverage (Florida Only)  Sinkhole Coverage (Florida Only)  Yes No  Limited [] Deluxe []  If yes to Sinkhole Coverage (Florida Only):  1) Have you observed: (i) the signs of settling, cracking, bulging, sagging, bending, leaning, shrinkage or expansion of any part of the dwelling or other structure or (ii) any depression in the ground surface on the premises? []Y []N  2) Have you been told, has it been disclosed to you or are you otherwise aware of: (i) a sinkhole that might affect the dwelling or other structures? []Y []N  3) At any time, has this property had any prior sinkhole claims?	Increased Special Limits (Jewelry/Watches/Furs)	Yes	No	J	Include	Liabil	lity for Golf Carts	Yes	No	,
Directors & Officers Coverage  Limited Fungi (Mold), Wet or Dry Rot Coverage  Section I: \$5K[] \$10K[] \$25K[] Yes No  Section II: \$5K[] \$10K[] \$25K[] Yes No  Section II: \$5K[] \$10K[] \$25K[] Yes No  Sinkhole Coverage (Florida Only)  Sinkhole Coverage (Florida Only)  If yes to Sinkhole Coverage (Florida Only):  1) Have you observed: (i) the signs of settling, cracking, bulging, sagging, bending, leaning, shrinkage or expansion of any part of the dwelling or other structure or (ii) any depression in the ground surface on the premises? []Y[]N  2) Have you been told, has it been disclosed to you or are you otherwise aware of: (i) a sinkhole that might affect the dwelling or other structures? []Y[]N  3) At any time, has this property had any prior sinkhole claims?	Identity Fraud	Yes	No					Yes	No	1
Section I: \$5K [ ] \$10K [ ] \$25K [ ] Yes No  Section II: \$5K [ ] \$10K [ ] \$25K [ ] Earthquake Coverage (States other than CA, OR, WA)  Sinkhole Coverage (Florida Only)  Yes No  Limited [ ] Deluxe [ ] Yes No  Limited [ ] Deluxe [ ] Yes No  If yes to Sinkhole Coverage (Florida Only):  If yes to Sinkhole Coverage (Florida Only):  If yes to Sinkhole Coverage (Florida Only):  If yes to Sinkhole Coverage (I) the signs of settling, cracking, bulging, sagging, bending, leaning, shrinkage or expansion of any part of the dwelling or other structure or (ii) any depression in the ground surface on the premises? [ ]Y [ ]N  2) Have you been told, has it been disclosed to you or are you otherwise aware of: (i) a sinkhole that might affect the dwelling or other structures or (ii) any other partial or complete sinking or collapse of the dwelling or other structures? [ ]Y [ ]N  3) At any time, has this property had any prior sinkhole claims?	Directors & Officers Coverage	Yes	No					Yes	No	
Section II: \$5K [ ] \$10K [ ] \$25K [ ] \$10K [ ] \$25K [ ] \$	Limited Fungi (Mold), Wet or Dry Rot Coverage			1	Vandal	ism &	Malicious Mischief (DP3 only)	Yes	No	
Section II: \$5K[ ] \$10K[ ] \$25K[ ]    Sinkhole Coverage (Florida Only)		Yes	No	1	Earthg	uake C	Coverage (States other than CA, OR, WA)	Yes	No	)
Sinkhole Coverage (Florida Only)  Yes  No  Limited [ ]  Deluxe [ ]  Yes  No  Limited [ ]  Deluxe [ ]  Yes  No  Limited [ ]  Deluxe [ ]  If yes to Sinkhole Coverage (Florida Only):  If yes to Sinkhole Coverage (Florida Only):  If yes to Earthquake Coverage in CA, OR, WA:  1) Have you observed: (i) the signs of settling, cracking, bulging, sagging, bending, leaning, shrinkage or expansion of any part of the dwelling or other structure or (ii) any depression in the ground surface on the premises? [ ]Y [ ]N 2) Have you been told, has it been disclosed to you or are you otherwise aware of: (i) a sinkhole that might affect the dwelling or other structures or (ii) any other partial or complete sinking or collapse of the dwelling or other structures? [ ]Y [ ]N  3) At any time, has this property had any prior sinkhole claims?	Section II: \$5K [ ] \$10K [ ] \$25K [ ]			Ţ	Earthq	uake (	Soverage (CA OR WA Only)			
If yes to Sinkhole Coverage (Florida Only):  If yes to Sinkhole Coverage (Florida Only):  If yes to Earthquake Coverage in CA, OR, WA:  1) Have you observed: (i) the signs of settling, cracking, bulging, sagging, bending, leaning, shrinkage or expansion of any part of the dwelling or other structure or (ii) any depression in the ground surface on the premises? [ ]Y [ ]N  2) Have you been told, has it been disclosed to you or are you otherwise aware of: (i) a sinkhole that might affect the dwelling or other structures or (ii) any other partial or complete sinking or collapse of the dwelling or other structures? [ ]Y [ ]N  3) At any time, has this property had any prior sinkhole claims?		Ves	No		-			Yes	No	1
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	1) Have you observed: (i) the signs of settling, cracking, bending, leaning, shrinkage or expansion of any part of other structure or (ii) any depression in the ground supremises? [ ]Y [ ]N 2) Have you been told, has it been disclosed to you or ar of: (i) a sinkhole that might affect the dwelling or other other partial or complete sinking or collapse of the dwe structures? [ ]Y [ ]N 3) At any time, has this property had any prior sinkhole	f the dwelling urface on the re you otherw r structures or elling or other	g or wise aware or (ii) any	1 2 3 4 5	1) If lo 2) If bu [ 3) Is th 4) Is th 5) Are	cated of uilt bet  ] Y ne dwel ne foun the wa	on a hillside, is the slope 25 degrees or less? [ tween 1920 and 1950, is there full seismic retro  [ ] N lling built on tall walls or posts? [ dation concrete/steel and reinforced? [ ater heater and fireplace chimney securely boli	ofitting? ] Y ] Y ted to th	Y [ Y [ ne dwelling	] N ] N g ] N

NOTICE TO APPLICANTS: PERSONAL INFORMATION ABOUT YOU MAY BE COLLECTED FROM PERSONS OTHER THAN YOU IN CONNECTION WITH THIS APPLICATION FOR INSURANCE AND SUBSEQUENT AMENDMENTS AND RENEWALS. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR BROKERS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES WITHOUT YOUR AUTHORIZATION. YOU HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND CAN REQUEST CORRECTION OF ANY INACCURACIES. A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING SUCH INFORMATION IS AVAILABLE UPON REQUEST.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR, CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT ACT, WHICH IS A CRIME AND MAY SUBJECT SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO ARKANSAS, NEW MEXICO AND WEST VIRGINIA APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT, OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO COLORADO APPLICANTS: IT IS UNLAWFUL TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES, DENIAL OF INSURANCE, AND CIVIL DAMAGES. ANY INSURANCE COMPANY OR AGENT OF AN INSURANCE COMPANY WHO KNOWINGLY PROVIDES FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO A POLICYHOLDER OR CLAIMANT FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE POLICYHOLDER OR CLAIMANT WITH REGARD TO A SETTLEMENT OR AWARD PAYABLE FROM INSURANCE PROCEEDS SHALL BE REPORTED TO THE COLORADO DIVISION OF INSURANCE WITHIN THE DEPARTMENT OF REGULATORY AUTHORITIES.

NOTICE TO DISTRICT OF COLUMBIA APPLICANTS: WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT.

NOTICE TO FLORIDA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

NOTICE TO KANSAS APPLICANTS:

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD, PRESENTS, CAUSES TO BE PRESENTED OR PREPARED WITH KNOWEDLGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, PURPORTED INSURER, BROKER OR ANY AGENT THEREOF, ANY WRITTEN STATEMENT AS PART OF, OR IN SUPPORT OF, AN APPLICATION FOR THE ISSUANCE OF, OR THE RATING OF AN INSURANCE POLICY FOR PERSONAL OR COMMERCIAL INSURANCE, OR A CLAIM FOR PAYMENT OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY FOR COMMERCIAL OR PERSONAL INSURANCE WHICH SUCH PERSON KNOWS TO CONTAIN MATERIAL FALSE INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT.

NOTICE TO KENTUCKY APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME.

NOTICE TO LOUISIANA APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON

NOTICE TO MAINE APPLICANTS: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES OR A DENIAL OF INSURANCE BENEFITS.

NOTICE TO MARYLAND APPLICANTS: ANY PERSON WHO KNOWINGLY AND WILLFULLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR WHO KNOWINGLY AND WILLFULLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO MINNESOTA APPLICANTS: A PERSON WHO FILES A CLAIM WITH INTENT TO DEFRAUD OR HELPS COMMIT A FRAUD AGAINST AN INSURER IS GUILTY OF A CRIME

NOTICE TO NEW JERSEY APPLICANTS: ANY PERSON WHO INCLUDES ANY FALSE OR MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO NEW YORK APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.

NOTICE TO OHIO APPLICANTS: ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

NOTICE TO OKLAHOMA APPLICANTS: WARNING: ANY PERSON WHO KNOWINGLY, AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY (365:15-1-10, 36 §3613.1).

NOTICE TO OREGON APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR, CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, MAY BE GUILTY OF A FRAUDULENT ACT, WHICH MAY BE A CRIME AND MAY SUBJECT SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO PENNSYLVANIA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO TENNESSEE, VIRGINIA AND WASHINGTON APPLICANTS: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS.

NOTICE TO VERMONT APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE STATEMENT IN AN APPLICATION FOR INSURANCE MAY BE GUILTY OF A CRIMINAL OFFENSE AND SUBJECT TO PENALTIES UNDER STATE LAW.

NOTICE: RISK SPECIALISTS COMPANIES INSURANCE AGENCY, INC., THE SURPLUS LINES INSURANCE BROKER THAT IS SUBMITTING THIS APPLICATION TO LEXINGTON INSURANCE COMPANY ("LEXINGTON"), MAY CHARGE YOU A FEE FOR PLACEMENT OF INSURANCE IN THE EVENT THAT THE INSURANCE YOU ARE REQUESTING IS ACCEPTED BY LEXINGTON. IF LEXINGTON ACCEPTS SUCH INSURANCE, THIS FEE WILL BE STATED IN THE QUOTE, BINDER, AND POLICY. YOUR ACCEPTANCE OF ANY SUCH QUOTE WILL CONSTITUTE YOUR AGREEMENT TO PAY SUCH FEE.

Applicant's Statement: The undersigned applicant declares that if the information supplied on this application changes between the date of this application and the
time when the insurance policy is issued, the applicant will immediately notify the insurer of such changes, and the insurer may withdraw or modify any outstanding
quotations and/or authorizations or agreement to bind this insurance.
The undersigned applicant further declares that I have read and understand the entire application including the applicable fraud warning, if any, and that the

DATE:

statements set forth in this application are true and complete.

PRODUCER'S SIGNATURE: \_