

**JOINT INSURANCE ASSOCIATION
170 W. RIDGELY RD., SUITE 230
LUTHERVILLE, MD 21093**

DATE: _____

SUPPLEMENTAL VACANCY/UNOCCUPANCY APPLICATION

THIS FORM MUST BE COMPLETED AND ATTACHED TO ALL APPLICATIONS FOR VACANT OR UNOCCUPIED PROPERTIES. Please see additional information on the back of this form.

____ VACANT

Applicant's Name: _____

____ UNOCCUPIED

Property Address: _____

JIA# _____

1. How long has the property been vacant/unoccupied? _____

2. What is the reason for vacancy/unoccupancy? _____

3. If this is an estate problem, will the property be sold, rented, etc? (If so, when?) _____

4. What are the prospects of occupancy? _____

5. If the property is to be rehabilitated:

a. When will work begin? _____

b. By whom is it to be done? _____

c. By whom is it being financed? _____

d. By what date will rehabilitation be completed? _____

6. What is the existing property value, and what will the value be at completion of rehabilitation? _____

Signature of Applicant

Date

VACANT -means building houses no furniture or equipment

UNOCCUPIED -means building houses furniture, fixtures or equipment but no one lives or works in it.

- If vacancy or unoccupancy is the result of an estate problem, question #3 of the form must be answered in detail.
- If the building is in the course of reconstruction or renovation, a copy of the contract(s) must be submitted with the application or with this form. If the applicant is performing the work, a signed letter from the applicant indicating (1) the general scope of the work to be performed, (2) the approximate cost of the work.
- If the building is being actively marketed for rental or sale, a copy of the listing agreement for the property must be provided.

No properties that are vacant/unoccupied for an extended period of time shall be written.

No vacant/unoccupied property will be approved for coverage until an inspection is made and an Approval Notice is issued.