

**Landowners, Vacant Land and Land Leased to Others Supplemental  
(To be used in conjunction with completed ACORD applications)**



Applicant's Name \_\_\_\_\_

DBA \_\_\_\_\_

Proposed Effective Date \_\_\_\_\_ To \_\_\_\_\_ (12:01 am Standard Time at the address of the Applicant)

Years of experience \_\_\_\_\_

Date business started \_\_\_\_\_

**Schedule of Locations:**

Loc #	Address	Type	Acreage

**TYPE:** (RED) Real Estate Development, (VL) Vacant Land, (LLO) Land Leased to Others, (O) Other.

If **Other**, please explain: \_\_\_\_\_

If (LLO) Land Leased to Others, does the tenant carry insurance naming the applicant as an additional insured?  Yes  No

**Indicate usage of the land, select all that apply:**

- ATV/UTV Riding       Camping       Cross Country Skiing       Dirt Biking       Farming
- Fishing       Grazing       Hiking       Hunting       Land Fill
- Logging       Mining       Motorcycling       Parking       Quarry
- Snowmobiling       Sledding       Tubing       Other

If **Other**, please explain: \_\_\_\_\_

What is on and around the land? \_\_\_\_\_

How is the land secured? \_\_\_\_\_

**Landowners, Vacant Land and Land Leased to Others Supplemental  
(To be used in conjunction with completed ACORD applications)**



How would you describe the flow of people on the land, by any means, including but not limited to cars, foot traffic, parking, etc.:

- Low                       Moderate                       High

Are there any buildings or structures on the land?  Yes    No

If yes, please explain: \_\_\_\_\_

Was land ever used as a land fill?  Yes    No

Is land declared as an EPA Superfund site?  Yes    No

Are there any underground fuel tanks on the property?  Yes    No

Are there any dams or reservoirs on the property?  Yes    No

Are there any gas or oil wells on the property?  Yes    No

Are there any below grade mines on the property?  Yes    No

Are there any lakes, reservoirs, or rivers on the property?  Yes    No

If yes, indicate the number of acres: \_\_\_\_\_

**Real Estate Property Development:**

Are there any planned real estate development activities?  Yes    No

If yes, indicate the nature of the development:  Residential Homes  Residential Condos/Townhomes  Commercial  Industrial

If building Residential Homes, please indicate the number of homes intended to be built: \_\_\_\_\_

Has the site work been completed?  Yes    No

If yes, estimated time for completion: \_\_\_\_\_

Who will be performing the construction work:

- Licensed Contractor     Applicant acting as General Contractor     Other (please explain) \_\_\_\_\_

Are certificates of insurance obtained from the contractors or subcontractors?  Yes    No

Is a contract with a hold-harmless clause in favor of the applicant obtained from contractor(s)?  Yes    No

**Account Construction/Land Sales Revenue Projections (if applicable)**

Year	Payroll	Gross Receipts	Sub-Contracted Cost (Incl Cost of Materials)
Next 12 Months			

**FRAUD WARNING:** 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. (Not applicable in AL, AR, CA, CO, DC, FL, KS, KY, LA, ME, MD, MN, NE, NJ, NY, OH, OK, OR, RI, TN, VA, VT, or WA.)

**NOTICE TO ALABAMA APPLICANTS:** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution fines or confinement in prison, or any combination thereof.

**NOTICE TO CALIFORNIA APPLICANTS. For your protection California law requires the following to appear on this form:** Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state 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 policy holder or claimant for the purpose of defrauding or attempting to defraud the policy holder 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 Agencies.

**WARNING TO DISTRICT OF COLUMBIA APPLICANTS:** 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 prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written, electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or 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 materially false information concerning any fact material thereto; 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 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 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 or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or 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 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.

**FRAUD WARNING (APPLICABLE IN ARKANSAS, LOUISIANA AND RHODE ISLAND):** 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.

**FRAUD WARNING (APPLICABLE IN VERMONT, NEBRASKA AND OREGON):** Any person who intentionally presents a materially false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.

**FRAUD WARNING (APPLICABLE IN TENNESSEE, VIRGINIA AND WASHINGTON):** 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.

**NEW YORK FRAUD WARNING:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for commercial insurance or a statement of claim for any commercial or personal insurance benefits containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, and any person who, in connection with such application or claim, who knowingly makes or knowingly assists, abets, solicits or conspires with another to make a false report of the theft, destruction, damage or conversion of any motor vehicle to a law enforcement agency, the department of motor vehicles or an insurance company commits a fraudulent act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the value of the subject motor vehicle or stated claim for each violation.

This questionnaire does not bind the Applicant nor the Company to complete the insurance, but it is agreed that the information contained herein shall be part of the basis of the contract should a policy be issued. By signing you are hereby certifying that all information is accurate to the best of your knowledge.

**Applicants Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Agents Signature** \_\_\_\_\_ **Date** \_\_\_\_\_