

## RENTED OR SEASONAL DWELLING

Most landlords are aware by now that the use of rental homes by tenants as a base for marijuana grow operations is on the increase. As a landlord, your main objective is to make sure you find the right tenant for your rental property. Damage sustained to the residence can include the removal of wallboards, ceiling tiles, floor coverings, and moisture damage caused by increased humidity. Illegal wiring also increases the potential of fire loss.

Insurance is not designed to cover this kind of destruction. You as the owner are in the best position to prevent this type of loss. Under the law, it is your right to inspect the inside of the premises at any time within 24 hours notice. Even if you can't access every part of the dwelling, the telltale signs of a grow operation may be present. Some include, windows totally covered, presence of a "skunky" odour of mature plants, no normal residential activity (talk to your neighbours), little or no furniture in the residence, sounds of loud exhaust or humidifier fans, condensation most always will be present in the windows, etc.

Even before renting your property, there are signs that should be a "red flag" for you. These include:

- Tenant insists on paying in cash (or offers to pay more than the market value),
- Tenant is vague or gives incomplete answers on the application,
- Tenant only wants to give out cell number or pager number,
- Tenant cannot produce references or identification, or
- Tenant doesn't show any interest in the layout of the suite.

If you suspect your tenant may be involved in a grow operation do not put yourself in any compromising position, notify the police immediately. If you would like more information on this subject or if you have any questions, please contact your local police detachment.

## RENTED/SEASONAL DWELLING UNDERWRITING QUESTIONNAIRE

### APPLICANT INFORMATION:

Full Legal Names of All Persons Listed on Land Title: \_\_\_\_\_  
 \_\_\_\_\_

Civic address: \_\_\_\_\_ Postal code: \_\_\_\_\_

Legal description: \_\_\_\_\_

Home phone: \_\_\_\_\_ Business phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Current policy expiry date: \_\_\_\_\_

Have you sustained any losses in the last five years: Yes  No

If yes, please describe the type of loss, approximate date and amount of claim.

Date of Loss	Type of Loss	Amount Paid

### DWELLING INFORMATION:

Year Dwelling Built: \_\_\_\_\_

Duplex: Yes  No

Tri-Level Split: Yes  No

Bi-Level: Yes  No

Strata Titled: Yes  No

Number of Stories (excluding Basement): \_\_\_\_\_

Area of main floor: \_\_\_\_\_ sq. ft. \*\*

Area of second floor: \_\_\_\_\_ sq. ft.

Area of third floor: \_\_\_\_\_ sq. ft.

Area of finished attic: \_\_\_\_\_ sq. ft.

Finished Basement Area: \_\_\_\_\_ sq. ft.

Unfinished Basement Area: \_\_\_\_\_ sq. ft.

Above Ground Basement? Yes  No

Below Ground Basement? Yes  No

Walkout basement? Yes  No

Is the basement finished with the same quality of materials as the other floors? Yes  No

#### Flooring:

% Hardwood: \_\_\_\_\_

% Carpet over hardwood: \_\_\_\_\_

% Wall to wall carpeting: \_\_\_\_\_

% Vinyl: \_\_\_\_\_

% Ceramic Tile: \_\_\_\_\_

% Ceramic Tile (imported): \_\_\_\_\_

% Parquet: \_\_\_\_\_

% Plank: \_\_\_\_\_

% Marble Tile: \_\_\_\_\_

% Slate: \_\_\_\_\_

% Laminate: \_\_\_\_\_

% Plywood only: \_\_\_\_\_

% Other: \_\_\_\_\_

#### Bathrooms:

Ensuite (4 fixtures): \_\_\_\_\_

Full (3 fixtures): \_\_\_\_\_

Half (2 fixtures): \_\_\_\_\_

### HVAC

### Quantity

Direct Vent Gas Fireplace? \_\_\_\_\_

Single Wood Burning Fireplace: \_\_\_\_\_

Double Fireplace: \_\_\_\_\_

Triple Fireplace: \_\_\_\_\_

0 Clearance Insert: \_\_\_\_\_

Gas Fireplace (direct vent): \_\_\_\_\_

Freestanding wood stove: \_\_\_\_\_

Electric Heat Pump using heating ducts: \_\_\_\_\_

Central Air Conditioning using heating ducts: \_\_\_\_\_

#### Attached Structures:

Open Porch: \_\_\_\_\_ sq. ft.

Closed Porch: \_\_\_\_\_ sq. ft.

Open Breezeway: \_\_\_\_\_ sq. ft.

Closed Breezeway: \_\_\_\_\_ sq. ft.

Stoop: \_\_\_\_\_ sq. ft.

Balcony: \_\_\_\_\_ sq. ft.

Deck: \_\_\_\_\_ sq. ft.

Sunroom: \_\_\_\_\_ sq. ft.

Patio Cover: \_\_\_\_\_ sq. ft.

Other: \_\_\_\_\_ sq. ft.

#### Garage:

**\*\* Include square footage of built in garages in the total square footage of the house.**

**Area of Garage/Carport: \_\_\_\_\_ sq. ft.**

\*\* Built in Garage - # of Cars: \_\_\_\_\_

\*\* Basement Garage - # of Cars: \_\_\_\_\_

Attached Garage - # of Cars: \_\_\_\_\_

Attached Carport - # of Cars: \_\_\_\_\_

Detached Garage - # of Cars: \_\_\_\_\_

#### Detached Structures:

#### Size:

Small Shed: \_\_\_\_\_

Barn: \_\_\_\_\_

Workshop: \_\_\_\_\_

Chicken Coop: \_\_\_\_\_

Stable: \_\_\_\_\_

Other: \_\_\_\_\_

**Type of Construction:**

- Standard   
 Standard plus   
 Custom built   
 Luxury

**If this house was recently built – how much did it cost to build the house, including contractor's profits?** \_\_\_\_\_

**Exterior Wall Construction**

- % Wood Siding: \_\_\_\_\_  
 % Aluminium Siding: \_\_\_\_\_  
 % Stucco & Frame \_\_\_\_\_  
 % Brick Veneer: \_\_\_\_\_  
 % Brick or Stone \_\_\_\_\_  
 % Solid Brick: \_\_\_\_\_  
 % Solid Stone: \_\_\_\_\_  
 % Other (describe) \_\_\_\_\_

**Interior Wall Construction**

- % Drywall: \_\_\_\_\_  
 % Plaster: \_\_\_\_\_  
 % Paint: \_\_\_\_\_  
 % Wallpaper: \_\_\_\_\_  
 % Tongue & Groove: \_\_\_\_\_  
 % Wood Panelling: \_\_\_\_\_  
 % Other: \_\_\_\_\_

**Ceilings (please provide percentage)**

- % Drywall: \_\_\_\_\_  
 % Plaster: \_\_\_\_\_  
 % Tongue & Groove: \_\_\_\_\_  
 % Cathedral Ceilings: \_\_\_\_\_  
 % 8' Ceiling: \_\_\_\_\_  
 % 9' Ceilings: \_\_\_\_\_

**Auxiliary Heating ( in addition to your primary source of heat )**

- Furnace & type of fuel: \_\_\_\_\_  
 Electric Baseboards: \_\_\_\_\_  
 Radiant Heating: \_\_\_\_\_  
 Other: \_\_\_\_\_  
 Auxiliary Heating: \_\_\_\_\_

**Foundation (please provide percentage)**

- Concrete: \_\_\_\_\_  
 Concrete Block: \_\_\_\_\_  
 Other (describe): \_\_\_\_\_  
 % Crawlspace: \_\_\_\_\_  
 % Piers Foundation: \_\_\_\_\_  
 % Hillside Foundation: \_\_\_\_\_  
 % Basement: \_\_\_\_\_

**How Many Corners Does Your Home Have?**

- 4 or Less: \_\_\_\_\_ 5 to 6: \_\_\_\_\_  
 7 to 8: \_\_\_\_\_ 9 or more: \_\_\_\_\_

**RISK PROTECTION INFORMATION:**

How many feet is the dwelling located from a fire hydrant? \_\_\_\_\_

How many miles is the dwelling from a responding fire hall? \_\_\_\_\_

Do you have an alarm system? Yes  No

If yes, is it:

Monitored  or is it Local?

Is it for:

Burglary  and/or Fire?

If it is monitored, what is the name of the monitoring company? \_\_\_\_\_

Do you have smoke detectors? Yes  No

If yes, are they:

Battery operated  or Electrically wired?

Do you have an interior sprinkler system? Yes  No

**SPECIAL FEATURES:**

Do you have a solarium and/or a sun room? Yes  No

If yes, what is the area of room? \_\_\_\_\_ Sq ft.

Is this in addition to the square footage listed for the main floor? Yes  No

Do you have a swimming pool? Yes  No

If yes, what is the square footage or surface area? \_\_\_\_\_ Sq ft.

Is the pool fully fenced? Yes  No

Is it made of Reinforced Concrete  Vinyl Liner  Fibre Glass

**MISCELLANEOUS ITEMS:**

**Does your house have any of the following features?**

- Central vacuum system: Yes  No
- Basic intercom system (AM/FM radio): Yes  No
- Extra Kitchen: Yes  No
- Central air conditioning: Yes  No
- Jetted bath tub: Yes  No
- Skylights: Yes  No  If yes, how many? \_\_\_\_\_
- Video door answering system: Yes  No
- Wet bar: Yes  No
- Water softener or purification system: Yes  No
- Jetted Hot Tub: Yes  No
- Sauna: Yes  No
- Additional building features (explain): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OCCUPANCY:**

Is this a single-family home? Yes  No   
If not, how many units are in the building? \_\_\_\_\_

**Rented Dwellings:**

Do you rent any part of the home or outbuildings? Yes  No   
Does the dwelling have a self-contained suite? Yes  No   
Monthly Rent Charged: \_\_\_\_\_  
How often do you inspect the interior of the house? \_\_\_\_\_  
How often do you inspect the exterior of the house? \_\_\_\_\_  
Do you have a property manager, if so, please provide details: \_\_\_\_\_  
Do you have a lease agreement in place with the tenant? \_\_\_\_\_  
Does the tenant have insurance coverage? \_\_\_\_\_  
Is a business or have an office operated out of this home? Yes  No   
If yes, what type of Business? \_\_\_\_\_  
Is a day care operated out of your home? Yes  No

**Seasonal Dwellings:**

Is this a seasonal residence? Yes  No   
How often do you visit the property and for what length of time each stay? \_\_\_\_\_  
Do you have anyone checking on the property for you when you are not there? \_\_\_\_\_  
If yes, what arrangements have been made? \_\_\_\_\_  
Do you have a dock or wharf on the property? Yes  No   
How many acres do you own? \_\_\_\_\_  
Do you farm any portion of the land? \_\_\_\_\_  
Do you have a house-keeper, gardener, or other hired help? Yes  No   
If yes, what are their duties and do they live on the premises? \_\_\_\_\_

Most policies do not cover increased costs resulting from changes in the building code or in any bylaw. Are there any Bylaws in your area that would affect the rebuilding of your home? Yes  No

Please provide details: \_\_\_\_\_

Damage to your dwelling or personal property due to an Earthquake, is not covered by your policy. An endorsement can be added for an additional premium. Would you like a Quotation? Yes  No

**UPDATING INFORMATION:**

**Electrical:** Fully or Partially Updated? \_\_\_\_\_  
**Year Updated** \_\_\_\_\_

Service Panel: Multi-Breaker \_\_\_\_\_  
Screw Fuses \_\_\_\_\_  
Amperage of Box: \_\_\_\_\_  
**Year Updated** \_\_\_\_\_

**Plumbing:** Fully or Partially Updated? \_\_\_\_\_  
**Year Updated** \_\_\_\_\_

Type of Pipes: % Galvanized Iron \_\_\_\_\_  
(What pipes are galvanized?) \_\_\_\_\_  
  
% Copper \_\_\_\_\_  
% Plastic \_\_\_\_\_

**Roofing:** Fully or Partially Updated? \_\_\_\_\_  
**Year Replaced** \_\_\_\_\_

Type of Materials: Asphalt   
Tar and Gravel   
Wood Shakes   
Wood Shingles   
Concrete Tile   
Metal   
Other (describe)  \_\_\_\_\_

**Heating:** Furnace (Central) \_\_\_\_\_  
Fuel Used: Natural Gas \_\_\_\_\_  
Oil \_\_\_\_\_  
In ground or above ground tank? \_\_\_\_\_  
Is the tank inside or outside of the house? \_\_\_\_\_  
Electric \_\_\_\_\_  
Radiant \_\_\_\_\_  
Other \_\_\_\_\_  
**Year Updated** \_\_\_\_\_

**Name and Address of Mortgagee or Unpaid Vendor:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE FORWARD EXTERIOR PHOTOGRAPHS OF THIS DWELLING ALONG WITH THE COMPLETED QUESTIONNAIRE TO [INFO@WMBECK.COM](mailto:INFO@WMBECK.COM) OR BY MAIL.**

**Signed:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_