



CENTERPOINT INSURANCE GROUP

MOBILE HOME PARK APPLICATION

PARK NAME: _____

PARK LOCATION: _____

BILLING CONTACT NAME: _____

1. Is the park managed by a management company? Yes No

If yes, name the company: _____

If Yes % of ownership in the park: _____

2. Type of Park: _____ % Retirement _____ % Adult _____ % Family _____ % Other
_____ % Permanent _____ % Seasonal

3. What is your current rent per space? _____ Total number of spaces? _____ Annual Receipts: _____
How often are the rent increases? _____ What are they based upon? _____
Occupancy rate: _____ % Tenancy annual turnover rate: _____ %

4. Is there an R.V. overnight exposure? Yes No If yes, number of spaces: _____

5. Is there a pool? Yes No Jacuzzi? Yes No Is pool in compliance with all life safety standards? Yes No

Comment on the extent of usage: _____

Is pool fences with safety rules posted and life saving equipment accessible? Yes No

Is Jacuzzi in same fenced area? Yes No or separate? Yes No

Is there a diving board or slide? Yes No Explain: _____

6. Are there any recreation facilities on the park premises such as playgrounds, tennis courts, or golf courses, Basketball courts, shuffleboard, bocci courts etc? Yes No If yes describe: _____

7. Are there any rental units on the premises? Yes No How many? _____

8. Do you sell new or used mobile home units? Yes No How many? _____ Annual Receipts _____

9. Is a log maintained to document all repairs and/or improvements? Yes No If so include a copy.

Do you obtain Certificates of Insurance from all independent contractors? Yes No

Do you obtain hold harmless agreements, in your favor, from independent contractors? Yes No

10. Is there a walk through inspection of the park for all new residents? Yes No If so include a copy.

11. Does the owner live in the park? Yes No If no, how often does the owner visit/inspect the park? _____

Does a full time manager live in the park? Yes No

Are there formal written and enforced park rules? Yes No If yes, please attach a copy.

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12. Is there a well or septic tank on the property? Yes No
If yes, is regular testing and maintenance performed by an outside contractor? Yes No
Is written documentation maintained? Yes No
13. Describe park maintenance and housekeeping, including the clubhouse, pool area, streets and roads:

14. Are underground systems maps available? Yes No Are the gas lines owned by the park? Yes No
If yes, is the park in compliance with the Federal Pipeline Safety Act (FSPA)? Yes No
If yes, please indicate that compliance documentation will follow and in what form: _____

15. Has the park experienced a backup of sewage in the past 12 months? Yes No
If so, please describe what happened and the corrective action taken:

16. Has the park ever been involved in litigation with the residents? Yes No
Does a threat of litigation with park residents currently exist? Yes No If yes, please explain:

17. Is security provided? Yes No Any armed guards? Yes No
Is security totally subcontracted out? Yes No
18. Does the mobile home park do any hook-ups of mobile homes? Yes No
19. Are there any operations open to the general public? Yes No If yes, explain: _____

20. Are there any plans to reduce services to the park? Yes No If yes, explain: _____

21. Have leases been made available to residents? Yes No If Yes, term? _____ Percentage signed? _____
Is there an arbitration clause in the lease agreement? Yes No
Does your lease have a pass through for capital improvements and/or increased operating expenses? Yes No
If yes, have pass throughs' ever included in a rent increase? Yes No If yes, briefly describe how
Pass through increase was received by your residents: _____

22. Are the park's fire hydrant outlets 2 ½ inches? Yes No
Is the responding fire department volunteer? Yes No If yes, please explain: _____

23. Does the park have procedures for fire and medical emergencies? Yes No

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24. Are there any major cracks, holes, or uneven areas of sidewalks, parking areas, or streets? Yes No
If yes, explain action to be taken: _____

25. Describe park lighting: _____

26. Is there a swimming or boating exposure on a body of water such as an ocean, lake or river? Yes No
If yes, fully describe: _____
If yes, are no swimming signed posted? Yes No

27. Is the park on leased land? Yes No If yes, give number of years remaining on lease: _____

28. Is the park located in a brush, forest, or landslide area? Yes No If yes, fully describe exposure and applicable protection: _____

29. Are sporting or social events sponsored? Yes No If yes, please explain: _____
Describe and include a photo: _____

30. How often is trash disposed of? _____ Have you received any complaints about the adequacy of this service? Yes No If so explain remedy: _____

31. Briefly explain why you feel this park represents a low hazard for becoming involved in "Failure to Maintain" Litigation:

AGENT'S/BROKER'S SIGNATURE: _____ DATE: _____

APPLICANT'S SIGNATURE: _____ DATE: _____