## **Sober Living Supplemental Application**

## NOTE: PLEASE INCLUDE THE RESUME OF THE SOBER LIVING HOME OPERATOR

Is the sober living operation:	For profit	Non-Profit		
Is there currently coverage for this home?	Yes	No	No	
If so, name of company that issued the policy and date	e coverage expires?			
Clients will be	Men	Women	Co-Ed	
Will services other than tenancy be offered?	Yes	No		
If yes, please detail				
Is there a pool on the property?	Yes	No		
Will there be any employees either 1099 or W2?	Yes	No		
If so, do you screen for sexual assault convictions?	Yes	No		
Do you want a quote for Workers Compensation?	Yes	No		
Will you have a tenancy agreement that requires				
client family contact data to ensure written notification of eviction?	Yes	No		
If the location is owned, name of the entity or person operating out of?	that owns the hou	se(es) the sober home is		
Do you currently have property coverage on the building?	Yes	No		
If yes, does your carrier know the tenant is a sober home (confirmed by the carrier in writing)?	Yes	No		
If not, would you like a quote for building coverage?	Yes	No		
If so, please provide:				
-The name on the deed & mortgage				

-The mailing address for the homeowner

-If the building(s) is/ar the following for each location		15 years, please provide the year and	what was upda	ited for
	Year	- I		
-Plumbing:				
-Heating:				
-Electrical:				
-Roof:				
· ·	•	lates have been carried out, please pro ring the work completed and the dates	•	n as
Would you like a quote for cor	ntents (items	in the house like furniture, TVs, etc.)?	Yes	No
If yes, how much?				
Would you like a quote for los	s of rents?		Yes	No
If so, how much?				
Does the sober home operation	onal entity o	wn any vehicles?	Yes	No
-If not, will you or any employ while working (running errand		ng your personal vehicles e, driving between locations, etc.)?	Yes	No
Would you like a quote for cyl	per liability?		Yes	No
• • • • • • • • • • • • • • • • • • • •		lity for any business involved with trea es will always view an alcohol or drug r	_	
Would you like a quote for professional liability?				No
Would you like a quote for Directors & officer's liability?				No