

## DWELLING APPLICATION CHECKLIST

### GENERAL INFORMATION

1. **Complete all sections of the application. Incomplete applications will be returned.**
2. Duplicate insurance is not permitted.
3. Answer all questions on property damage losses. If there is existing damage, attach a copy of the contract for repairs from a licensed contractor, signed by both the applicant and contractor.
4. To request Replacement Cost coverage, attach a completed Optional Replacement Cost Addendum (Form CFP-RCA-2). This form can be downloaded from the FAIR Plan web site ([www.cfpnet.com](http://www.cfpnet.com)).
5. There are coverage restrictions/exclusions in the policy for buildings which are vacant or unoccupied. A FAIR Plan Vacancy Permit Endorsement is necessary to provide coverage for Vandalism or Malicious Mischief.
6. For a dwelling in the Course of Construction or undergoing a significant remodel/renovation, complete a Commercial Application.

### GENERAL GUIDELINES

1. A Dwelling policy may be issued to insure:
  - A building used exclusively for dwelling purposes (other than Course of Construction) with not more than four (4) apartments and with no more than five (5) roomers or boarders in total, including trailer homes, mobile homes, or floating homes used exclusively for dwelling purposes at a fixed location. Trailer or mobile homes are not eligible for Replacement Cost coverage.
  - Household and personal property in an apartment, condominium, or private living quarters of an applicant. (Not eligible for Replacement Cost coverage.)
2. Complete a separate application for each dwelling. Note that a guest house with cooking facilities requires a separate application and cannot be insured as an "Other Structure." A guest house without cooking facilities also requires a separate application if it is being rented to someone other than the owner or tenant of the primary dwelling on the property.
3. Describe any "Other Structures" in the COVERAGE AND RATING INFORMATION section and provide a value for each structure for which specific coverage is required. Attach a schedule, if necessary. "Other Structures" denotes structures other than the dwelling that are not attached to it, such as an unattached garage, tool shed, pool house, swimming pool, fence, gazebo, walkway, etc. A separate amount of insurance may be needed for these items to ensure adequate insurance coverage. These structures are not eligible for insurance under the dwelling program if they are used in whole or in part for commercial, manufacturing, or farming purposes.
4. The standard deductible is \$250.00. However, rate credits for both structure and contents are provided if a higher deductible is requested. Select only one deductible amount.
5. Check one (and only one) box in the COVERAGE AND RATING INFORMATION section for the following items: units, construction and occupancy.

### PERILS YOU MAY INSURE AGAINST AND OPTIONAL COVERAGES AVAILABLE

1. Standard Perils Insured Against include Fire, Lightning and Internal Explosion
2. Additional Perils You May Insure Against That Are Typically Purchased
  - a. Extended Coverage (ECE): includes coverage for loss caused by Windstorm or Hail, Explosion, Riot or Civil Commotion, Aircraft or Vehicles, Smoke and Volcanic Eruption.
  - b. Vandalism or Malicious Mischief (VMM). Only available if policy includes ECE.
3. Optional Coverages Available
  - a. Replacement Cost: An "Optional Replacement Cost Addendum", Form CFP-RCA-2 must be submitted to determine eligibility (form available at [www.cfpnet.com](http://www.cfpnet.com)).
  - b. Inflation Guard (for Dwelling, Condominium Improvements, Alterations and Additions, and, if present, Ordinance or Law Coverage); automatically included unless declined (subject to maximum limit of liability available)
  - c. Fair Rental Value Coverage can be purchased for up to 20% of the Dwelling Limit (in addition to the 10% sub-limit built into the policy contract). For condominium unit owners, Fair Rental Value coverage can be purchased for up to 20% of the Improvements, Alterations, and Additions limit.
  - d. Ordinance or Law Coverage can be purchased for up to 10% of the Dwelling Limit (or 10% of the Improvements, Alterations, and Additions limit for condominium unit owners).
  - e. Other Optional Coverages that may be added to a policy include: Plants, Shrubs and Trees; Fences; Awnings; Outdoor Radio and TV Equipment; Signs; Building Improvements, Additions and Alterations.
  - f. Earthquake Coverage: Available through the California Earthquake Authority (CEA) as a separate policy. Submit separate CEA application (available at [www.cfpnet.com](http://www.cfpnet.com)).

**CALIFORNIA FAIR PLAN PROPERTY INSURANCE**  
**APPLICATION FOR DWELLING INSURANCE**

DATE (MM/DD/YYYY)

**IMPORTANT - PLEASE READ**

THIS DOES NOT CONSTITUTE A BINDER. DO NOT SUBMIT ANY MONEY WITH THIS APPLICATION.

THIS APPLICATION WILL BE THE BASIS FOR ANY POLICY ISSUANCE AND THE ACCEPTANCE OR REJECTION OF COVERAGE. IT IS THE RESPONSIBILITY OF THE APPLICANT AND THE APPLICANT'S REPRESENTATIVE TO MAKE SURE THAT THE INFORMATION SUBMITTED IS IN ALL RESPECTS ACCURATE. PROPERTY INSPECTIONS WHEN MADE ARE ONLY FOR THE PURPOSE OF DETERMINING THE PHYSICAL CONDITION OF THE PROPERTY.

ALL ITEMS MUST BE COMPLETED. INCOMPLETE APPLICATIONS WILL BE RETURNED.

California FAIR Plan Property Insurance  
P.O. Box 76924, Los Angeles, CA 90076-0924  
3435 Wilshire Blvd., Suite 1200  
Los Angeles, CA 90010  
Telephone: (213) 487-0111

**APPLICANT INFORMATION** (must be legal owner(s) and/or recorded title holder(s) of Property) **BROKER INFORMATION**

FIRST	MIDDLE	LAST	NAME		
FIRST	MIDDLE	LAST	ADDRESS		
MAILING ADDRESS			CITY	STATE	ZIP
CITY			TELEPHONE #		
STATE	ZIP		LICENSE #	FED ID OR SOC SEC #	

**LOCATION OF PROPERTY TO BE INSURED**

ADDRESS				
CITY	COUNTY	STATE	ZIP (must be included)	

DEDUCTIBLE REQUESTED	<input type="checkbox"/> \$250	<input type="checkbox"/> \$500	<input type="checkbox"/> \$1,000	<input type="checkbox"/> \$2,500	<input type="checkbox"/> I DECLINE INFLATION GUARD
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**COVERAGE AND RATING INFORMATION - A SEPARATE APPLICATION IS REQUIRED FOR EACH DWELLING**

<b>COVERAGES</b> \$ _____ ON DWELLING \$ _____ ON CONTENTS \$ _____ FAIR RENTAL VALUE \$ _____ ORDINANCE OR LAW \$ _____ ON OTHER STRUCTURES _____ (Describe OTHER STRUCTURES) REQUEST ANY ADDITIONAL COVERAGES IN THE REMARKS SECTION	<b>UNITS (Under One Roof)</b> <input type="checkbox"/> SINGLE FAMILY <input type="checkbox"/> DUPLEX <input type="checkbox"/> TRIPLEX <input type="checkbox"/> FOUR-PLEX	<b>PERILS</b> <input type="checkbox"/> FIRE <input type="checkbox"/> EXTENDED COVERAGE <input type="checkbox"/> VANDALISM OR MALICIOUS MISCHIEF	<b>CONSTRUCTION</b> <input type="checkbox"/> FRAME <input type="checkbox"/> MASONRY <input type="checkbox"/> MOBILE HOME <input type="checkbox"/> OTHER (Describe) _____ Approx. Year of Construction	<b>OCCUPANCY</b> <input type="checkbox"/> OWNER <input type="checkbox"/> TENANT <input type="checkbox"/> SEASONAL <input type="checkbox"/> VACANT OR UNOCCUPIED
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**TENANTS OR CONDOMINIUM UNIT OWNERS' HOUSEHOLD PERSONAL PROPERTY COVERAGE**

<b>COVERAGES</b> \$ _____ ON PERSONAL PROPERTY \$ _____ ON IMPROVEMENTS, ALTERATIONS & ADDITIONS \$ _____ FAIR RENTAL VALUE \$ _____ ORDINANCE OR LAW	<b>PERILS</b> <input type="checkbox"/> FIRE <input type="checkbox"/> EXTENDED COVERAGE <input type="checkbox"/> VANDALISM OR MALICIOUS MISCHIEF	<b>CONSTRUCTION</b> <input type="checkbox"/> FRAME <input type="checkbox"/> MASONRY <input type="checkbox"/> OTHER (Describe) _____ Approx. Year of Construction	<b>OCCUPANCY</b> <input type="checkbox"/> TENANT <input type="checkbox"/> OWNER <input type="checkbox"/> VACANT OR UNOCCUPIED _____ # OF UNITS IN BUILDING
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**MORTGAGEE / LOSS PAYEE**

NAME	LOAN NUMBER	NAME	LOAN NUMBER		
ADDRESS		ADDRESS			
CITY	STATE	ZIP	CITY	STATE	ZIP
<input type="checkbox"/>	MORTGAGEE	<input type="checkbox"/>	LOSS PAYEE	<input type="checkbox"/>	CONTRACT OF SALE

**PRIOR INSURANCE**

Cancellation or Expiration Date of Present Coverage	PRESENT INSURER (If there is no insurance in effect, write "none")	POLICY NUMBER
PRIOR INSURER	REASON FOR TERMINATION	POLICY NUMBER
Has FAIR Plan ever refused coverage, cancelled coverage or non-renewed coverage at this location? If "Yes", give policy number and reason.		
POLICY NUMBER	REASON	YES <input type="checkbox"/> NO <input type="checkbox"/>

