



Dealer Name : _____

Dealer Address: _____

Agent Name: _____

CURRENT INSURANCE INFORMATION

Current Insurance Company: _____

Policy Expiration _____ Current Annual Premium \$ _____

Is this a new purchase? ___Yes ___No

If so, are you aware of any claims in the prior three (3) year with the previous owner? ___Yes ___No

SALES INFORMATION

Annual Gross Sales \$ _____

Cost of Goods Sold \$ _____

Annual Payroll \$ _____ *(Payroll minus Payroll for Officers, Executives, Managers)

Do you use a Real Estate Broker? ___Yes ___No

of Annual Broker Transactions: _____

Annual Brokered Sales \$ _____

Do you carry Real Estate Errors & Omissions? ___Yes ___No

Do you take "title" of repossessed homes? ___Yes ___No

If yes, are homes more than 7 years old? ___Yes ___No

Do you accept repos consigned by lenders? ___Yes ___No

If yes, are homes more than 7 years old? ___Yes ___No

of Annual Consignment Sales _____

Annual Consignment Sales \$ _____

Estimated # of units sold each year? ___New Homes ___Used Homes

Percentage more than 7 years old _____

Any units sold over 20yrs. old? ___Yes ___No - Qty: _____

Do you include warranties with the sale of a used home? ___Yes ___No

Do you include an arbitration clause with the sale of every home? ___Yes ___No

Do you buy land and place homes for sale on the land? ___Yes ___No

Do you place homes for sale within parks? ___Yes ___No

If yes, average # of parks per year: _____

Please provide schedule of all locations.

INVENTORY / FLOORING INFORMATION

Average # of units on site: _____ Value \$ _____

Annual Flooring / Credit Line: _____ Flooring Sources? _____

List the Home Manufacturers you represent:



OPERATIONS QUESTIONS

Do all subcontractors list you as additional insured on their insurance policy? ___Yes ___No

Do you keep copies of your subcontractor's insurance certificates? ___Yes ___No

Units taken in trade per year: Mobile/Modular Homes___ Autos___ Motor Homes___ Boats
___ Other (please describe)_____

Do you sell used Autos, Trucks, Motor Homes? ___Yes ___No

If yes, # sold during past year? _____

Do you have Dealer plates? ___Yes ___No

of non-motorized plates___ # of Motorized plates _____

Do you have a written Hold Harmless Agreement from your manufacturers? ___Yes ___No

Named as Additional Insured with your manufacturers? ___Yes ___No

Deliver homes for others? ___Yes ___No

Build sheds/decks/carports/garages? ___Yes ___No

Refurbish/repair used homes? ___Yes ___No

Modular set-up/installations? ___Yes ___No

Sub-contract home delivery and set-up/installation? ___%

Indicate percentage of delivery by owned vehicles ___%

Indicate percentage of delivery sub-contracted vehicles ___%

Drivers under age 21? ___Yes ___No

Are all Display units equipped with stairs? ___Yes ___No Handrails? ___Yes ___No

Do you sell units containing fireplace inserts or woodburning stoves? ___Yes ___No

If yes, do you install? ___Yes ___No

Do you sell, service or distribute LP gas? ___Yes ___No # of Gallons___ Receipts_____

Do you sell or store gasoline? ___Yes ___No # of Gallons___ Receipts_____

Do you do any work on furnaces, electrical or plumbing? ___Yes ___No

Sub-contractors used? ___Yes ___No

If yes, are certificates required of at least \$1,000,000 CSL? ___Yes ___No

Any subcontracted operations other than delivery or installations? ___Yes ___No

If yes, please explain type of work or operation:

Do you sponsor any events? ___Yes ___No If yes, describe: _____

Do you carry Work Comp on your employees? ___Yes ___No

Lot Surface: Paved ___ Gravel___ Other_____

Parking lot: Paved ___ Gravel___ Other_____

Display area: Paved ___ Gravel___ Other_____

Storage area: Paved ___ Gravel___ Other_____

Tie downs: Office Units? ___Yes ___No Display Units? ___Yes ___No

Inventory units? ___Yes ___No

Distance between units? 5ft ___ 5-10ft___ 11-15ft___ Over 15ft___

Fencing: 100% fenced with locked gates___ Display storage area fenced___

Storage only fenced___ Partially fenced___ Not fenced___

Please list all property and liability claims you are aware of in the last 3 years:

******Attach a copy of Certificates of Insurance for contractors used within the last year.**



SUPPLEMENTAL DEALER QUESTIONNAIRE

I understand and agree that all contractors and/or sub-contractors hired under formal agreement whether verbal or written, are subject to providing certificates of insurance with liability limits for their work of at least \$1,000,000 BI/PD per occurrence. I also agree to require contractors and/or sub-contractors to name Dealer as Additional Insured on contractor and/or sub-contractors insurance policy. The undersigned hereby represent that all of the questions answered in this questionnaire have been reviewed and understand the representation made herein.

Insured Signature: _____

Date: _____

Agent Signature: _____

Date: _____