



Red Shield Insurance Company®

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**FLOATING PROPERTY
COURSE OF CONSTRUCTION
SUPPLEMENTAL QUESTIONNAIRE**

Page 1 of 2



| | |
|--|--------------------|
| NAMED INSURED / APPLICANT NAME: | POLICY NO.: |
|--|--------------------|

| | |
|--------------------|-------------------------|
| START DATE: | COMPLETION DATE: |
|--------------------|-------------------------|

DESCRIPTION OF WORK BEING COMPLETED:

THE PROJECT WILL INCLUDE (check all that apply):

- MOVING, ALTERING, OR ADDING LOAD BEARING WALLS
- OPENING OF ROOF OR EXTERIOR WALL
- CEASING TO INHABIT THE HOME FOR MORE THAN 14 DAYS
- REMOVING FURNISHINGS, CLOTHING, ETC.
- A NEW FLOATATION SYSTEM BEING INSTALLED

| | |
|---------------------------------------|---|
| NAME OF CONTRACTOR DOING WORK: | IS CONTACTOR LICENSED AND BONDED? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | HIRING LICENSED SUB-CONTRACTORS? <input type="checkbox"/> YES <input type="checkbox"/> NO |

DESCRIBE CONTRACTOR'S EXPERIENCE WITH FLOATING HOMES:

WILL CONSTRUCTION OCCUR AT RISK ADDRESS OR WILL HOME BE TOWED AWAY?

RISK ADDRESS TOWED AWAY

WILL INSURED OCCUPY HOME DURING CONSTRUCTION?

YES NO

DESCRIBE HOW WILL THE HOME BE SECURED FROM THEFT DURING CONSTRUCTION:

PLEASE CONTINUE TO PAGE TWO

ADDITIONAL NOTES

Applicable in Washington: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Applicable in Oregon: Any person who knowingly and with intent to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in CA, ID & UT: Any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties.

APPLICANT'S SIGNATURE _____ Date _____

Producer has reviewed this application fully with the applicant and, to the best of the producer's ability, is confident that all information given is truthful.

PRODUCER'S SIGNATURE _____ Date _____