

MOBILE HOME PARK RISK SELECTION QUESTIONNAIRE

**MUST BE COMPLETED AND SIGNED BY PERSON RESPONSIBLE FOR EITHER
OWNERSHIP OR MANAGEMENT OF PROPERTY**

Client Number: _____

Legal Ownership Entity: _____

Park Name: _____

Park Address: _____

FEIN: _____

Primary Contact Name: _____

Mailing Address: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

of mobile home spaces: _____

of occupied mobile home spaces: _____

of spaces being occupied by parkowned mobile _____

homes: _____

of parkowned mobile homes occupied by employees: _____

of parkowned mobile homes being held for rental: _____

of parkowned mobile homes being held for sale: _____

of RV sites (not storage): _____

1. Has any Named Insured established a new Corporation, LLC, or Partnership, not already named as an insured on the policy? Yes ☐ No ☐ If yes, please explain: _____
2. Do you have a storage area for recreational vehicles? Yes ☐ No ☐ Do you charge for storage? Yes ☐ No ☐ If so, do you have a storage agreement that includes a "hold harmless" clause? Yes ☐ No ☐ How many recreational vehicles do you store? _____
3. ALL AGE ☐ SENIOR ☐ (check one)
4. Does the mobile home park that is the subject of this questionnaire belong to Western Manufactured Housing Communities Association (WMA) as a current member in good standing? Yes: ☐ No: ☐
5. Does the mobile home park that is the subject of this questionnaire belong to a Mobile Home Park Owners Association other than the WMA? Yes ☐ No ☐ If yes, please advise the name of the Association. _____
6. Year mobile home park was built? _____ If over 25 year old describe updates that have been made to parkowned water, sewer, gas and electrical systems?

7. Is the Park operating under a local rent control ordinance? Yes ☐ No ☐ If yes, does decontrol apply? Yes ☐ No ☐ If yes, Full ☐/Partial ☐. Does your ordinance have provisions for a special increase which you plan to apply for? Yes ☐ No ☐ Briefly describe any increase provisions of the ordinance.

8. Have leases been made available to residents? Yes ☐ No ☐ If yes, term? _____ Percentage signed? _____% Does your lease have pass through provisions for capital improvements and/or increased operating expenses? _____ If yes, has a pass through ever been included in a rent increase? _____ If yes, briefly describe how pass through was received by your residents.
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9. Do you have an arbitration or mediation agreement with your residents, either as a separate agreement or incorporated in you lease or rental agreement? Yes ☐ No ☐ What percentage of your residents have signed it? _____
10. What is your current average rent per space? _____
11. What is your average rent for park owned homes? _____
12. What is your estimated annual Mobile Home site rental income? _____
13. What is your estimated annual RV Site rental income? _____
14. Do you stagger your rent increases? Yes ☐ No ☐ Please explain
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15. Date of your last rent increase? _____
16. Amount of your last rent increase? \$ _____
17. Date of your next anticipated rent increase? _____
18. Amount of your next anticipated rent increase? \$ _____
19. What is your policy with regard to frequency and amount of future rent increases?
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20. Is your mobile home park a resident owned community or common ownership development? Yes ☐ No ☐ If yes, What are your monthly HOA dues per space? _____
21. Does a professional independent management company operate your park? Yes ☐ No ☐ If yes, name of company? _____
22. Are any operations open to the general public? Yes ☐ No ☐ If yes, explain
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23. Is the business entity that owns and operates the park that's subject of this questionnaire involved in the sale of mobile homes? Yes ☐ No ☐ If yes, explain and indicate estimated annual dollar amount of sales.
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- If another business entity that you control is involved in mobile home sales, please contact us to discuss further. Your separate business entity is not autmatically insured under the policy for your mobile home park for mobile home sales.
24. Is there a manager on the premises at all times? Yes ☐ No ☐ If no, please explain
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25. Is park involved in direct sale or distribution of LP gas? Yes ☐ No ☐ If yes, fully describe
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26. Are there any plans to reduce services in the park? Yes ☐ No ☐ If yes, explain
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27. Are there plans to change the use of your community to a use other then the rental of manufactured home spaces, i.e. convert to another use, create a subdivision, or otherwise change the current use of your property? Yes ☐ No ☐ If yes, explain
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28. Is there a RV, overnight exposure? Yes ☐ No ☐ If yes, explain
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29. Are the park's fire hydrant outlets at least 2 ½ " Yes ☐ No ☐ Is the responding fire department volunteer? Yes ☐ No ☐ If yes, give details
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30. Does the park have written procedures for fire and medical emergencies? Yes ☐ No ☐
31. Does the park have a procedure to receive resident complaints? Yes ☐ No ☐ Briefly explain
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- Does this include a complaint log? Yes ☐ No ☐ Has there been an increase in complaints during the past 12 months Yes ☐ No ☐ If yes, what do you feel is the cause of this increase?
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32. Are there any major cracks, holes or uneven areas of sidewalks, parking areas or streets? Yes ☐ No ☐ If yes, explain action to be taken.
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33. Does park reflect pride of ownership? Yes ☐ No ☐ If not, explain steps that are being taken to improve the property
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34. Describe park lighting.
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35. How often is trash disposed of? _____ Have complaints been received from the residents regarding the adequacy of this service? Yes ☐ No ☐ If so, explain remedy.
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36. Is there a swimming pool? Yes ☐ No ☐ Jacuzzi? Yes ☐ No ☐ Is pool fenced 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 ☐ Is there a water exposure on or contiguous to the mobile home park property such as a stream, river, lake, pond, dam, dike, levee, dock, bridge, or ocean? Yes ☐ No ☐ If so, please provide full details.
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37. Does your park have a past history of flooding? Yes ☐ No ☐ If yes, explain.
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38. Is the mobile home park located in a brush, forest or landslide area? Yes ☐ No ☐ If yes, fully describe exposure and applicable protection.
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39. Was the mobile home park built on a landfill? Yes ☐ No ☐ If so, has this been fully disclosed to the residents? Yes ☐ No ☐ Explain any difficulties that may have occurred as a result of the landfill.
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40. Are there any recreational facilities on the mobile home park premises such as playgrounds, tennis courts or golf courses? Yes ☐ No ☐ If yes, fully describe and include photos.
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41. Is the mobile home park on leased land? Yes ☐ No ☐ If yes, give number of years remaining on lease _____

42. Does the park own the gas lines? Yes ☐ No ☐ If yes, is park in compliance with the Federal Pipeline Safety Act? Yes ☐ No ☐
43. Does Park sub-meter electricity? Yes ☐ No ☐
44. Is there a water well on the mobile home park property? Yes ☐ No ☐ If so, provide a detailed explanation of its operation including any past history of water quality problems
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45. Is there an on-site sewage treatment facility and/or septic tank(s)? Yes ☐ No ☐ If yes, how frequently is tank emptied? _____ Where/how is sewage disposed of?
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46. Has your park experienced a backup of sewage in the past 12 months? Yes ☐ No ☐ If so, please describe what happened and your remedy to prevent a future backup.
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47. Does the flow of sewage require the use of a sewer lift station or pumps? Yes ☐ No ☐ If yes, give full details to include procedure if a failure in the system should occur.
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48. Regarding park owner disclosure requirement SB 534, has a Mobile Home Park Rental Agreement Disclosure Form been completed (**Applies to California Only**)? Yes ☐ No ☐ Is the completed form on file and available to prospective tenants? Yes ☐ No ☐ **Attach a copy of the completed disclosure form to this questionnaire.**
49. Any Security provided? Yes ☐ No ☐ If so, please describe. Armed or unarmed?
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50. Has the park ever been involved in litigation with a group of residents? Yes ☐ No ☐ Does a threat of litigation with the park residents currently exist? Yes ☐ No ☐ If yes, explain.
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51. Our mobile home park insurance program assumes that the insured property presents a low hazard for becoming involved in "Failure to Maintain" litigation. Briefly explain why you feel this to be the case.
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Signed By: _____ **Date:** _____

Name & Title: _____

Property Schedule/ Statement of Values

If you wish to insure any owned structures (i.e. clubhouse, laundry building, dwellings, carports, sheds, etc.) please include on the below property scheduld.

[illegible]

Park Owned Manufactured Home Schedule/ Statement of Values (Sales or Rental)

If you wish to insure any park owned mobile homes, please provide as much information on each home as possible below.

[illegible]