



Texas Specialty Underwriters, Inc.

510 Turtle Cove Blvd., Suite 200
Rockwall, Texas 75087

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Dwelling Liability Application

PERSONAL LIABILITY

PREMISES LIABILITY

Applicant's Name
Mailing Address
Street Address
City
County State Zip Code

Agent Name
Agent Number

PROPOSED EFFECTIVE DATE:

From 12:01 A.M., Standard Time at the address of the Applicant To

LIMIT OF LIABILITY REQUESTED: \$

Location #1:

Street Address
City
County State Zip Code
1 & 2 Family 3 Family 4 Family
Owner Tenant Seasonal Vacant Renovation Builder's Risk Other

Location #2:

Street Address
City
County State Zip Code
1 & 2 Family 3 Family 4 Family
Owner Tenant Seasonal Vacant Renovation Builder's Risk Other

Please answer all questions:

- 1. Swimming pool
2. Dog on premises
3. Any other animals
4. Smoke detectors
5. Trampolines
6. Property well maintained
7. Trip and fall hazards
8. Steps have secured handrails
9. Day care on premises
10. Any business on premises

11. Applicant's occupation: \_\_\_\_\_

12. What are the applicant's hobbies? \_\_\_\_\_

\_\_\_\_\_

13. If under renovation or builder's risk, who is the contractor (provide certificate of insurance)? \_\_\_\_\_

\_\_\_\_\_

14. Adjacent structures, other than a garage?  Yes  No If yes, what are they used for? \_\_\_\_\_

\_\_\_\_\_

15. Acreage?  Yes  No If yes, what is it used for? \_\_\_\_\_

\_\_\_\_\_

16. Any losses in the last five years? \_\_\_\_\_

17. Explain all yes answers: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PRIOR CARRIER: \_\_\_\_\_ POLICY NUMBER: \_\_\_\_\_

Has any company cancelled, nonrenewed or refused coverage to the Applicant?  Yes  No  
(Not applicable to Missouri applicants)

Include photo of premises with application.

APPLICANT'S SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

PRODUCER'S SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

**IMPORTANT NOTICE**

As part of our underwriting procedure, a routine inquiry may be made to obtain applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.