



LEATHERSTOCKING COOPERATIVE INSURANCE COMPANY

P.O. Box 630, Cooperstown, NY 13326 : phone(607)547-2007: fax (607)547-2056

LANDLORD RENEWAL QUESTIONNAIRE

NAMED INSURED: _____
POLICY NUMBER: _____

YOUR POLICY IS SCHEDULED TO RENEW AND LEATHERSTOCKING WOULD LIKE TO UPDATE THE INFORMATION ON YOUR HOME. PLEASE COMPLETE THIS FORM, YOU MAY GIVE US THE UPDATED INFORMATION OVER THE PHONE AT (800) 886-8048, MON-FRI 8:00-4:30 OR EMAIL TO: bburdick@leatherstockinginsurance.com. THIS FORM IS ALSO AVAILABLE @ www.leatherstockinginsurance.com

FAILURE TO RETURN THE RENEWAL QUESTIONNAIRE MAY RESULT IN THE TERMINATION OF YOUR POLICY.

IF THIS POLICY COVERS MORE THAN ONE PROPERTY PLEASE LIST THE PROPERTY ADDRESS IN WHICH THE QUESTION PERTAINS TO.

1. IS THERE AN UNDERGROUND FUEL TANK? YES ___ NO ___
LOCATION: _____
2. ARE THERE ANY DOGS AT THIS LOCATION? YES ___ NO ___
IF YES, PLEASE SPECIFY BREED(S) _____
ANY HISTORY OF BITING? YES ___ NO ___
LOCATION: _____
3. ARE THERE ANY HORSES OR OTHER FARM ANIMALS AT THE PROPERTY? YES ___ NO ___
IF YES, HOW MANY AND WHAT ARE THEY USED FOR: _____
LOCATION: _____
4. IS ANY BUSINESS OR FARMING CONDUCTED ON PREMISES? YES ___ NO ___
IF YES, PLEASE DESCRIBE _____
WHAT WERE LAST YEAR'S RECEIPTS? _____
LOCATION: _____
5. ARE THERE SMOKE DETECTORS? YES ___ NO ___
IF YES, BATTERY SMOKE ALARM ___ HARDWIRED SMOKE ALARM ___
LOCATION: _____
6. ARE THERE ANY SOLID FUEL DEVICES? YES ___ NO ___
IF YES, PLEASE CHECK – WOOD BURNING STOVE ___ FIREPLACE INSERT ___ WOOD FURNACE ___
PELLET STOVE ___ FIREPLACE ___ OUTSIDE WOOD FURNACE ___ OR OTHER ___?
IF OTHER, PLEASE DESCRIBE: _____
IF MORE THAN ONE DEVICE, PLEASE INDICATE: _____
7. IS THERE AN IN-GROUND OR ABOVE GROUND SWIMMING POOL? YES ___ NO ___
LOCATION: _____
8. IS THERE A TRAMPOLINE? YES ___ NO ___
LOCATION: _____

9. IS THE PROPERTY COMPLETELY OCCUPIED AT THIS TIME? YES ___ NO ___
IF NO, PLEASE EXPLAIN _____
LOCATION: _____

10. ARE THERE ANY SHORT TERM RENTALS? YES ___ NO ___
IF YES, TO WHOM AND FOR HOW LONG? _____
LOCATION: _____

11. IS THERE A PROPERTY MANAGER? YES ___ NO ___
IF YES, DO THEY LIVE WITHIN A 25 MILE RADIUS? YES ___ NO ___
LOCATION: _____

12. ARE THERE ANY COLLEGE STUDENTS LIVING AT THIS PROPERTY? YES ___ NO ___
IF YES, HOW MANY? _____ HOW MANY IN EACH UNIT? _____
ARE STUDENTS AFFILIATED WITH ANY TYPE OF ORGANIZATION? YES ___ NO ___
LOCATION: _____

13. HAS THERE BEEN ANY PROPERTY/BUILDING CODE VIOLATIONS IN THE LAST THREE YEARS?
YES ___ NO ___ IF YES, PLEASE EXPLAIN: _____
LOCATION: _____

14. HAS THERE BEEN ANY MAJOR IMPROVEMENT MADE TO THE PROPERTY IN THE LAST 5 YEARS?
NEW ROOF _____ NEW HEATING _____ NEW WIRING _____ NEW PLUMBING _____,
OTHER _____
LOCATION: _____

15. IS YOUR MAILING ADDRESS CORRECT AS SHOWN ABOVE? YES ___ NO ___
IF NO, PLEASE CORRECT _____

THANK YOU FOR YOUR COOPERATION. WE VALUE YOUR BUSINESS!

EMAIL ADDRESS: _____

PHONE NUMBER: _____

SIGNATURE: _____ DATE: _____