☒ **Scottsdale Insurance Company**
Home Office: One Nationwide Plaza
Columbus, Ohio 43215
Adm. Office: 18700 North Hayden Road
Scottsdale, Arizona 85255

☐ **Scottsdale Indemnity Company**
Home Office: One Nationwide Plaza
Columbus, Ohio 43215
Adm. Office: 18700 North Hayden Road
Scottsdale, Arizona 85255

☐ **Scottsdale Surplus Lines Insurance Company**
Adm. Office: 18700 North Hayden Road
Scottsdale, Arizona 85255

VACATION RENTAL SUPPLEMENTAL APPLICATION

(To be completed in addition to the Application)

Applicant's Name: _____

Mailing Address: _____

_____

_____

Agent Name: Unique Insurance Service, Inc.

Address: PO Box 750997

Petaluma, CA 94975-0997

Agency Code: 14431

PROPOSED EFFECTIVE DATE: From _____ **To** _____ **12:01 A.M., Standard Time at the address of the Applicant**

APPLICANT INFORMATION

Address of insured Property: _____

1. Provide links to any websites and/or the name of any websites where the rental is advertised: _____
   _____
   _____
2. What length of time is the dwelling offered for rental? (Check all that apply)
   ☐ Hourly ☐ Daily ☐ Weekly ☐ Monthly ☐ Annually
   ☐ Other (Please Describe): _____
3. What is the minimum number of nights rented per rental term? _____
4. What is the cost per night rental rate? _____
5. How many weeks per year is this property rented? _____
6. What purpose or use is the dwelling available for rent? (Check all that apply)
   ☐ Residential ☐ Corporate/Business/Networking ☐ Photo/Film Shoot
   ☐ Party/Reception/Wedding ☐ Exhibit/Show ☐ Meeting/Workshop/Training
   ☐ Other (Please Describe): _____
7. What is the maximum number of tenants and their guests allowed in the dwelling? _____
8. Is there a management company contracted for this rental? ..... ☐ Yes ☐ No
   a. If yes, what is their general liability limit? _____
   b. If no management company, how are renters screened and who screens the renters? _____
   _____
9. Is the rental inspected after each rental? ..... ☐ Yes ☐ No
   a. If yes, who inspects the dwelling? _____
10. What is the minimum age for tenants? _____
11. Are there any employees (Maids, Groundskeepers, Caretakers, etc.)? ..... ☐ Yes ☐ No
    a. If yes, are they resident employees? ..... ☐ Yes ☐ No
12. Are there any enclosed swimming pools or trampolines on the property? ..... ☐ Yes ☐ No
13. Will there be any usage by the insured as a secondary or seasonal residence? ..... ☐ Yes ☐ No

Nationwide®

APPLICANT'S STATEMENT:

I have read the above application and I declare that to the best of my knowledge and belief all of the foregoing statements are true, and that these statements are offered as an inducement to us to issue the policy for which I am applying. (Kansas: This does not constitute a warranty.)

APPLICANT'S SIGNATURE: _____ DATE: _____

PRODUCER'S SIGNATURE: _____ DATE: _____

AGENT NAME: _____ AGENT LICENSE NUMBER: _____