



**Great American Insurance Group**  
**Supplemental Application for Indoor Air Quality and Mold Liability Insurance**

**Named Insured:** \_\_\_\_\_

**Notice:** This supplemental application forms a part of the Application for Environmental Insurance.

**Instructions:**

- Answer all questions completely. If any questions do not apply, please state N/A in the space provided.
- Please provide supporting information on a separate sheet and reference the applicable question number. Any supporting information is considered part of this application and subject to the same terms and conditions.

**Required Attachments:**

- Please provide copies of your last five (5) years of Property and General Liability loss history.
- Please provide a copy of current Statement of Values for proposed locations.
- Please provide copies of available building inspection reports.
- Please provide a copy of your Water Intrusion Management Plan / Mold Operation and Maintenance Plan.

1. Has any proposed location had an indoor air quality and/or mold problem that cost more than \$20,000 to resolve?  YES  NO

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Are there any visible signs of mold growth at any proposed location?  YES  NO

If yes, please describe and approximate the square footage impacted: \_\_\_\_\_

\_\_\_\_\_

3. Have any proposed locations had construction defects or maintenance problems that resulted in indoor air quality and/or mold problems?  YES  NO

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

4. Has a complaint ever been made by a third party relating to indoor air quality and/or mold problems at a proposed location?  YES  NO

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

5. Do you have a formal process to document and track indoor air quality and/or mold complaints?

YES  NO

6. Have indoor air quality and/or mold inspections been performed at the proposed locations?  YES  NO

If yes, were any indoor air quality or mold issues identified?  YES  NO

If yes, please describe and attach the related report(s): \_\_\_\_\_  
\_\_\_\_\_

7. Are any proposed locations in flood plains or otherwise subject to periodic flooding or the ponding of water?  YES  NO

If yes, please describe and explain what steps have been taken to prevent future damage? \_\_\_\_\_  
\_\_\_\_\_

8. Do you have employees on-site and dedicated to the management of the proposed locations?  YES  NO

If yes, have the employees undergone specific training with regards to indoor air quality and/or mold?  YES  NO

9. Do you use an unrelated Property Management Company to manage the proposed locations?  YES  NO

If yes, please provide the Name and Address of the Property Management Company:  
\_\_\_\_\_

If yes, do you require the Property Manager to carry environmental insurance for the proposed locations?  YES  NO

If yes, please specify the limit of liability required to be carried by the Property Manager or attach a certificate of insurance:  
\_\_\_\_\_

It is acknowledged by the applicant that this Supplemental Application is considered part of the Application for Environmental Insurance and is subject to the same terms and conditions.

\_\_\_\_\_ Applicant's Initials.