



Hawaii Property Insurance Association

745 Fort Street Mall Suite 1100 Honolulu, HI 96813

NEW BUSINESS SUBMISSION - SUPPLEMENTAL INFORMATION and CHECKLIST (REQUIRED for ALL New Business Submissions)

1. Is the Acord application completed, signed, dated, and attached?
2. Is the TMK shown on the Acord application? If No, enter full TMK here: ___ - ___ - ___ - ___ - ___ - ___
3. Is the Replacement Cost Estimator (version HPIA 1006 09/15) completed, signed, dated, and attached?
(NOTE: The Replacement Cost Estimator (RCE) may be downloaded from www.hpiainfo.com)
4. Are two (2) clear and bright color photos of the dwelling, which were taken within the last two (2) weeks, attached?
(NOTE: 1 photo of front and 1 photo of back of dwelling is REQUIRED)
5. Are there any other structures on the location to be insured?
If YES, please describe other structures:

6. Is there a water catchment tank?
If YES, is one (1) clear and bright color photo of the catchment tank attached?
If YES, how many gallons does the water catchment tank hold? _____
(NOTE: Minimum 8,000 gallons REQUIRED)
7. Did the agent inspect the property? If YES, what was inspection date? _____
8. Is dwelling more than 30 years old?
If YES, is the completed HO/DF Supplemental Questionnaire signed, dated and attached?
9. Is the Acknowledgement of Hurricane & Flood Exclusion signed, dated, and attached?
10. A minimum deposit of \$250 is REQUIRED. Is a copy of the deposit premium payment attached?
11. Two (2) declinations are REQUIRED. Provide the name of the two insurance companies who declined the submission.
Carrier Name 1 _____ Carrier Name 2 _____
12. Is this a Homeowners submission? If YES, is the dwelling owner-occupied?
13. Is this a Dwelling Fire submission?
rented out for less than six (6) months at a time? If YES, is the dwelling currently or will be in the future
14. Is any business conducted on the property? If YES, please explain:

15. Are all structures permitted (including carports, additions, and attachments)?

Insured's Name _____ Insured's Signature _____ Date _____

Agent's Name _____ Agent's Signature _____ Date _____

Hawaii Property Insurance Association

745 Fort Street Mall Suite 1100 - Honolulu, Hawaii 96813

Phone: (808) 585-3524 Fax: (808) 585-3510 www.hpiainfo.com