

## **Supplemental Named Insured Questionnaire**

1. What is the Name of The Trust, Corporation, LLC or LLP? Who are the Principals?
  
2. Why was the entity formed? (Please be specific).
  
3. Does this Trust, Corporation, LLC or LLP engage in any form of commerce? If so, what is the nature of the business?
  
4. Does this Trust, Corporation, LLC or LLP have any employees? If so, please advise number, duties and if covered by Workers Compensation.
  
5. What is the occupancy type (i.e. Primary, Secondary, Seasonal, Rental, etc..)? Who are the occupants?
  
6. Is the property rented at any time during the year? If so, how often and to whom?
  
7. Is the property vacant during the year? If so, for how long?
  
8. Is there a permanent resident or caretaker living on the premises?
  
9. Is the Additional Interest listed on the deed?