



## Incidental Day Care Supplemental Questionnaire

This questionnaire is only applicable to incidental family licensed day care operations in a residence owned or rented by the named insured(s) on a Dryden Mutual Homeowner or Manufactured Home policy.

**Note: No coverage bound for Day Care Liability without prior approval.**

Applicant's Name, Address, City, State & Zip

Agent Name

Policy #, if not a new application: \_\_\_\_\_

Agent Code: \_\_\_\_\_

### GENERAL INFORMATION

1) How many adults will be supervising the day care? \_\_\_\_\_ adult(s)

2) How many years of experience with providing day care? \_\_\_\_\_ year(s)

3) Maximum number of children in day care during the day: \_\_\_\_\_

4) Are there any dogs kept on premises (Y/N)? \_\_\_\_\_

If yes, provide breed(s): \_\_\_\_\_

If yes, how many dogs? \_\_\_\_\_

If yes, has any dog ever bitten either child or adult (Y/N)? \_\_\_\_\_

6) Any other types of animals or reptiles on premises (Y/N)? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

7) Are there any pools (inground or above ground) on premises (Y/N)? \_\_\_\_\_

If yes, is the pool fenced with a self-locking gate (Y/N)? \_\_\_\_\_

8) Is there any waterfront on premises (creek, river, pond or lake) (Y/N)? \_\_\_\_\_

If yes, is insured's yard/premises fenced with a self-locking gate to keep children away from water exposures (Y/N)? \_\_\_\_\_

10) Are there any alternative heating units in dwelling (Y/N)? \_\_\_\_\_

If yes, please indicate type of unit: \_\_\_\_\_

If other, please explain: \_\_\_\_\_

Where is this alternative heating unit located? \_\_\_\_\_

Is there a permanent protective barrier around the heating unit? \_\_\_\_\_

### REMARKS

**MUST BE LICENSED FAMILY DAY CARE PROVIDER. PLEASE FORWARD COPY OF MOST RECENTLY ISSUED LICENSE.**

### INSURANCE FRAUD WARNING NOTICE

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Agent: \_\_\_\_\_ Date: \_\_\_\_\_ Applicant: \_\_\_\_\_