



ROOM RENTAL QUESTIONNAIRE

- 1. Applicant's Name: \_\_\_\_\_
- 2. Describe the number and type of room rentals: # or Rooms \_\_\_\_\_, # of Floors with Room Rentals.
- 3. What term are the rooms rented for: \_\_\_ Daily, \_\_\_ Weekly, \_\_\_ Monthly, \_\_\_ Yearly.
- 4. Are long term residents required to sign a lease? .....  YES  NO  
 What is the average duration of a lease? \_\_\_\_\_
- 5. Are the rooms licensed/inspected annually by the local authorities? .....  YES  NO
- 6. How is access to the premises controlled:  
 Are all doors to common area locked and only tenants provided with keys? .....  YES  NO  
 Individual rooms with assigned keys? .....  YES  NO
- 7. Is cooking or cooking equipment permitted in the rooms? .....  YES  NO  
 Describe the type of equipment permitted: \_\_\_\_\_  
 \_\_\_\_\_
- 8. Are Smoke detectors in all rooms including common areas?.....  YES  NO
- 9. Are Fire Extinguishers provided and serviced annually?.....  YES  NO  
 Describe Number and type of Fire Extinguishers: \_\_\_\_\_  
 \_\_\_\_\_
- 10. Does the premises have a Fire Alarm? .....  YES  NO  
 Is the Alarm - \_\_\_ Local, \_\_\_ Monitored, \_\_\_ Central Station?
- 11. Describe an additional Fire Protection: \_\_\_\_\_
- 12. Where are ashes stored and how are they disposed? \_\_\_\_\_
- 13. Describe methods of egress from the premises, type and construction of interior or exterior stairs: \_\_\_  
 \_\_\_\_\_
- 14. Are Fire Alarm guidelines posted? .....  YES  NO
- 15. Are Emergency Lights powered with battery back ups? .....  YES  NO
- 16. Who is responsible for managing the rooms? \_\_\_\_\_  
 \_\_\_\_\_
- 17. Is there a night clerk or supervision 24 hours a day? .....  YES  NO
- 18. Are the rooms cleaned or inspected by Company Staff?.....  YES  NO  
 Please describe: \_\_\_\_\_

*Coverage will be subject to: Vandalism by Tenants Exclusion and (if no cooking indicated) Cooking in Rooms Exclusion*