



Day Care Center Tenant Application
(Lessor's Risk Only-No Operation by Insured)

Named Insured _____

Street Address _____

City, State, Zip _____

1. Is the Day Care Center operated by the insured? _____

2. Does the insured earn receipts from Day Care Center operations? _____

3. Who operates the Day Care Center? _____

4. Are they licensed? Y ___ N ___ Part of Chain _____

5. Does the lease contain a hold harmless agreement favorable only to the insured? Y ___ N ___

6. What limits of liability must the Day Care Center carry? _____

7. Is the building owner named as an additional insured? _____

8. Does the insured maintain copies of current Certificates of Insurance? Y ___ N ___

9. Who is responsible for security? _____

10. Who maintains the premises? _____

11. Describe the Day Care Center: _____

12. Total Square Feet: _____ 13. Hours of Operation: _____

14. Building Life safety Questions:

a. Is center located on the first floor? Y ___ N ___ b. Is there emergency lighting? Y ___ N ___

c. Is there direct egress to the outside? Y ___ N ___ d. Are there smoke detectors? Y ___ N ___

e. Are there 2 exits directly to the outside? Y ___ N ___

f. Are there illuminated exit signs? Y ___ N ___ g. Is the building fully sprinklered? Y ___ N ___

h. Is there a central station alarm? Y ___ N ___ i. Is there a manual pull fire alarm? Y ___ N ___

j. Are there fire extinguishers on premises? Y ___ N ___

15. How many enrolled children are: Ages 0-2 ___ Ages 3-5 ___ Ages 6-7 ___ Ages 8+ ___

16. What is the ratio of caregivers to children? _____

17. a. Is there cooking or food preparation done on premises? Y ___ N ___

b. If so, please describe the extent: _____

c. If there is cooking, is there a fire-suppression (Ansul) system installed at the location? Y ___ N ___

18. a. Please list all outdoor recreation equipment: _____

b. Who is responsible for its maintenance? _____

c. Who is responsible for security? _____

Named Insured Signature Line: Print Name

Signature With Title

Date