



## Request a Proposal

### Contact Information

Name (First, Last): \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Fax Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

### Management Firm Information

Firm's name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_

### HOA Information

Name of HOA: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_

Does the HOA currently carry Fidelity coverage? Yes No

Have there been any losses discovered/sustained  
 in the last six (6) years? Yes No  
*if yes, please describe details of loss and corrective measures taken*

Has any similar insurance been declined/cancelled  
 within the past three (3) years? Yes No

Requested Fidelity Limit: \_\_\_\_\_ Deductible: \_\_\_\_\_

Current Fidelity Limit: \_\_\_\_\_ Deductible: \_\_\_\_\_

Is the management company listed as a named insured  
 on the current fidelity? Yes No

Does the management company managing the HOA  
 carry Errors & Omissions insurance? Yes No

*The undersigned declares that to the best of his/her knowledge and belief that the statements set forth herein are true*

\_\_\_\_\_ (authorized signature\*) \_\_\_\_\_ (title) \_\_\_\_\_ (date)

*\*Signature of a member of the Board of Directors or authorized representative of the Association.*

**Request a Proposal by faxing or emailing this form to  
 (619) 593-2008 • info@masterfidelity.com**