

National Casualty Company
Home Office: Madison, Wisconsin
Adm. Office: 8877 North Gainey Center Drive
Scottsdale, Arizona 85258

Scottsdale Indemnity Company
Home Office: One Nationwide Plaza
Columbus, Ohio 43215
Adm. Office: 8877 North Gainey Center Drive
Scottsdale, Arizona 85258

Scottsdale Insurance Company
Home Office: One Nationwide Plaza
Columbus, Ohio 43215
Adm. Office: 8877 North Gainey Center Drive
Scottsdale, Arizona 85258

Scottsdale Surplus Lines Insurance Company
Adm. Office: 8877 North Gainey Center Drive
Scottsdale, Arizona 85258

1-800-423-7675

Euclid Managers
234 Spring Lake Drive
Itasca, Illinois 60143
Phone (630) 238-1900
Fax (630) 773-8590
Email mail@euclidmanagers.com

EUCLID MANAGERS®

Public Entity Application Public Housing Authority Questionnaire H

Legal Name of Public Entity: _____ **Effective Date:** _____

1. Total number of units: _____ Number of conventional units: _____ Number of residents: _____
Number of Section 8 & 23 units: _____ Number of residents: _____

2. Number of stories per unit: _____
Advise number of buildings over four stories and heights for each: _____

3. Type of security and/or fire protection measures in place: _____

4. Do buildings have smoke detectors?..... Yes No
If "yes": battery-powered, or hardwired (into building electrical system?)
If battery-powered, what is the scheduled maintenance plan? _____

5. Are the units ADA compliant?..... Yes No

6. What accommodations are made to handle the elderly or handicapped?: _____

7. Describe recreational or extracurricular programs sponsored by the housing authority and the facilities:

8. Day care facilities?..... Yes No
If "yes," complete questionnaire C.

9. **Lead Abatement Information (Complete for each location built prior to 1978.)**
a. Have these buildings been tested for the presence of lead?..... Yes No
b. Are there any known lead-related claims, past or present?..... Yes No
Provide complete details: _____

c. Does the insured have a certificate of completion for lead abatement? Yes No
If "yes," attach a copy and complete the following questions:

d. What method of lead abatement was used?

- | | | | |
|---------------------------------|--|--|--|
| <input type="checkbox"/> Paint: | <input type="checkbox"/> Encapsulation | <input type="checkbox"/> Component replacement | <input type="checkbox"/> Abrasive removal |
| | <input type="checkbox"/> Enclosure | <input type="checkbox"/> Chemical removal | <input type="checkbox"/> Hand removal/scraping |

Soil: _____

Water: _____

e. Is annual retesting done at this location? Yes No
(Attach the latest certificate)

f. Is this authority in compliance with the Housing and Community Development Act? Yes No
If "no," describe measures being taken to bring buildings into compliance: _____

