

Customer Information for Mine Subsidence Insurance  
**(This is not an application)**

**Owner Info**

*(Provide names as they appear on deed)*

Type of Ownership:  Individual  Estate or Trusts  Companies or Corporations  
 Association insuring a condo or co-op  Individual insuring a condo or co-op unit  
First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_ SSN (last 4 digits): \_\_\_\_\_  
Oldest deeded property owner: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ EIN (last 4 digits): \_\_\_\_\_  
Name of Estate, Trust, Company, Corporation or Association: \_\_\_\_\_

**Structure Info**

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: PA Zip code: \_\_\_\_\_  
County: \_\_\_\_\_ Municipality: \_\_\_\_\_ Year Built: \_\_\_\_\_  
Number of Stories: \_\_\_\_\_ Primary Residence:  Yes  No Estimated Replacement Cost of Structure: \_\_\_\_\_  
Structure Type:  House  Condo/Co-op  Detached Garage  Townhouse  Mobile/Double-wide  
 Barn  Outbuilding  Apartment/Rental  Other  
**Multi-unit Structures (only)** Number of Units:  2-4  5 or more Structure Configuration:  Horizontal  Vertical

**Contact Info**

*(Provide name and address only if different from the owner information)*

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Primary Telephone: \_\_\_\_\_ Secondary Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Receive policy billing notices via e-mail?  Yes  No

**Structure Condition Info**

*(Coverage is dependent upon the accuracy of the following information.)*

1. Is this structure a complete building? **(Must contain a roof, walls and a foundation which firmly attaches the structure to the earth.)**  Yes  No

If no, please describe the structure: \_\_\_\_\_

2. Is any part of this structure used for business purposes?  Yes  No

If **yes**, please estimate the percentage of the structure that is used for business purposes and explain the usage in detail. *(examples of businesses include business offices, wholesale shops, and retail shops)* **NOTE: A detached garage for a residence is 0%.** %, and explain the usage in detail.

3. Are there any **damage(s) or problem(s)** with the **walls, floors, foundations or other structural components** due to past or present movement, shifting, deterioration, etc.? *(Examples of damage include, but are not limited to: cracks or separations in walls, ceilings or floors; walls, floors, or ceilings out of level, plumb, or square (tilting or pitching); doors or windows not opening or closing properly, etc.)*  Yes  No

If **yes**, describe the extent, location, and approximate time damage(s) or problem(s) occurred. \_\_\_\_\_

4. Were any repairs ever made to your structure's foundation walls, basement floor, brickwork, porches, patios, walkways, etc., either by you, a previous owner, contractor, or third party?  Yes  No

If yes, describe the repairs in detail, including what was repaired, why, when, costs, etc. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Has there been any earth movement or stability problems such as ground cracks, depressions, landslides or slips, mine discharges or mine subsidence that have occurred on your property or surrounding areas of your neighborhood?  Yes  No

If yes, describe the extent, location of, and approximate time damage(s) or problem(s) occurred. If damage(s) or problem(s) have been repaired, explain when and how they were repaired.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Have you ever filed a claim or reported damage(s) or problem(s) with the Mine Subsidence Insurance Fund, with your homeowner's insurance, or any third party such as a mine operator or another state or federal agency, regarding ANY damages or problems with your property?  Yes  No

If yes, describe the extent, location of, and approximate time damage(s) or problem(s) occurred. If damage(s) or problem(s) have been repaired, explain when and how they were repaired.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Payment Info

Coverage Amount: \_\_\_\_\_ Closing Date: \_\_\_\_\_  
(Cannot exceed \$1,000,000 or replacement cost, whichever is less)

#### Survey Info

How did the applicant hear about MSI: