

RSIG Member Inspection Request Form

As a member of RSIG you have demonstrated a higher standard by meeting our stringent underwriting criteria. To show our carrier our commitment to risk management, we in turn require that the membership maintain facilities that meet our underwriting criteria. If you have questions about these requirements, please don't hesitate to contact us at 703-365-0199. Below are some things to consider before ordering your inspections:

- 1. All current and potential RSIG Members are required to have offices and storage facilities that meet current underwriting criteria—this includes current members who may move or add new facilities. These requirements include: 6' Chain Link Fence w/ 3 strands of barbed wire or razor wire. Other fence types considered include brick, concrete, metal, etc. Pasture fencing, chicken wire and fences under the required height generally cannot be approved. Debtor property and keys must be secured. Offices and storage facilities cannot be shared with any other business and repossessed vehicles and property should not be intermingled with any other cars/property.*
- 2. RSIG does not provide buildings and contents coverage for any property owned/leased/rented by you – if your fence is cut, roof caves in, computers for the business or other business equipment/tools are stolen; they are not covered under the RSIG master policies. Contact Lighthouse Insurance for a property quote today at 703-365-0362.*
- 3. For underwriting and compliance purposes, all inspections will require access to the storage facilities, office, and truck(s) for that location. We highly recommend that the member or a manager knowledgeable in all aspects of the company be onsite for the inspection in case the inspector has questions or needs access to certain areas.*
- 4. Adding locations may affect your minimum monthly report payments and may require additional deposits. For questions on if this may impact you, please contact our office before you order an inspection. Moving a location does not affect your monthly reports, and deposit monies held by RSIG.*
- 5. Newly acquired locations are afforded coverage while the inspection is pending. THIS GRACE PERIOD IS TIME-SENSITIVE AND IS NOT INDEFINITE. Before you move call our membership department to discuss your situation so we can work out the best solution for your particular situation. If you have to move on short notice please contact us right away – the sooner the better. Don't put your coverage at risk!*
- 6. The inspector is not an employee of RSIG – he or she is a representative of a third-party company. At the end of the inspection you may be sent a short survey to complete about your experience with the inspector. We ask that you take a few minutes and fill it out as it will help us in the future to provide you with the best experience possible.*
- 7. Due to contractual agreements with our vendors, copies of the inspection cannot be released to members or their clients as they are part of our internal underwriting file.*

As the approved RSIG Member, I have read the above and understand that I am bound by my agreement with RSIG to maintain the current underwriting criteria. If I have questions about any of the above, it is my responsibility to contact RSIG. I also understand that I am required to comply with the inspector's inspection related questions/requests and if I have any questions about this process I am to direct them to an RSIG representative. As the inspector is a an independent third party, they have no authority to answer questions on the behalf of RSIG or to waive or change any inspection requirements

Member Name: _____

Member Signature: _____

Company Code: _____ Date: _____

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(Please be sure not to leave any blank spaces below—call us if you have questions)

Code: _____ Company Name: _____ Date _____

Member or Manager

ordering inspection: _____ Ph: _____ Email: _____

Onsite contact (if
different than above): _____ Ph: _____ Email: _____

_____ I am *MOVING* my facility at (list old address): _____

_____ I am *ADDING* a facility*** (Adding facilities may affect monthly payments and member deposits)

This facility is: _____ An Office _____ A Storage Facility _____ Both

Address of Office (or N/A if no office): _____

Address of Storage: _____

I _____ OWN OR _____ RENT/LEASE THIS PROPERTY. Name/Co Name of Landlord: _____

If leasing please answer: I _____ DO or _____ DO NOT have a lease (please include a copy of the lease or proof of purchase when requesting your inspection)

Is the space shared? _____ Yes _____ No Is any portion used as a residence? _____ Yes _____ No

Type of Neighborhood: _____ Industrial _____ Rural _____ Residential _____ Other (pls explain) _____

Is storage: _____ Indoor _____ Outdoor _____ Both If outdoor, type of fence: _____ Height of fence: _____

Does barbed wire or razor top the fence line: _____ Yes _____ No If Yes to Barbed Wire-how many strands _____

Security Measures Incl: _____ Cameras _____ Alarm _____ Lights _____ Motions Sensors _____ Dogs _____ Security Guard

Maximum Number of Cars held at one time: _____ Indoor + _____ Outdoor = _____ Total

Please describe special security measures/procedures for ATV's/motorcycles/equipment/high-end vehicles, if any: _____

Is there a separate entrance for debtors retrieving vehicle or personal property? _____ Yes _____ No