



WASHINGTON
**RENTER'S INSURANCE
CONFIRMATION ADDENDUM**



DATE _____ PROPERTY NAME / NUMBER _____

RESIDENT NAME(S) _____

UNIT NUMBER _____ STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

SAMPLE Resident(s) acknowledge that the Rental Agreement requires Resident(s) to obtain and maintain liability insurance: (i) with coverage limits of at least \$ SAMPLE (\$100,000 if not filled in); (ii) that lists all Residents as named insureds (if there are multiple policies obtained by different Residents, use a separate form for each policy); and (iii) that lists Owner/Agent as an "interested party" authorizing the insurer to notify Owner/Agent of: (A) cancellation or nonrenewal of the policy; (B) reduction of policy coverage; or (C) removal of Owner/Agent as an interested party.

SAMPLE Resident(s) have provided the following information related to such insurance which Resident(s) warrant is complete and accurate:

SAMPLE **[Attach a copy of the policy declaration page]** SAMPLE

SAMPLE Name of Insurance Company: SAMPLE

SAMPLE Policy No: SAMPLE

List all Named Insureds (must list all Residents unless separate policies cover each Resident):

SAMPLE

Limits of Liability Coverage: \$ SAMPLE Renewal Date: SAMPLE

Insurance Agent: Name SAMPLE

Address SAMPLE

Phone Number SAMPLE

Owner/Agent listed as an Interested Party has been confirmed:

Initials of person confirming: SAMPLE

[Attach a copy of such designation from the insurance company]

Additional provisions:

SAMPLE

Resident will update the information on this form when any change occurs to the insurance, or upon request of Owner/Agent.

Resident acknowledges that: (i) failure to maintain such insurance in full force is a material non-compliance with the Rental Agreement; (ii) Resident is not a co-insured under, and has no rights to, Owner/Agent's insurance policies; and (iii) except to the extent required by law, Owner/Agent is not responsible for, and its insurance does not cover damage or destruction to, Resident's property. **Owner/Agent recommends that Resident(s) obtain coverage under their insurance policy for damage to their own property.**

<u>SAMPLE</u>	<u>SAMPLE</u>	<u>SAMPLE</u>	<u>SAMPLE</u>
X RESIDENT	DATE	X RESIDENT	DATE
<u>SAMPLE</u>	<u>SAMPLE</u>	<u>SAMPLE</u>	<u>SAMPLE</u>
X RESIDENT	DATE	X RESIDENT	DATE
<u>SAMPLE</u>	<u>SAMPLE</u>	<u>SAMPLE</u>	<u>SAMPLE</u>
X RESIDENT	DATE	X RESIDENT	DATE
		<u>SAMPLE</u>	<u>SAMPLE</u>
		X OWNER/AGENT	DATE