

Applicant name: _____ Policy effective date: _____

Address: _____ Year built: _____

HISTORIC BUILDINGS

- 1. Does the property schedule include any buildings listed on a historic register or have known historic values? Yes No
- 2. What is the current occupancy and use? _____
- 3. Date of last professional appraisal: _____ Please attach a copy
- 4. Please describe plans for building in the event of a major loss? _____

- 5. Are you aware of any federal, state or local ordinance or law that would affect the reconstruction of this building after a loss? Yes No

UPDATING/RENOVATION

- 1. Plumbing
 - a. Year system updated: _____
 - b. What updates have been completed? _____
 - c. Does the building include any original plumbing—main, supply, or drainage lines? Yes No
If so, please explain: _____
- 2. Electrical
 - a. Year wiring updated: _____
 - b. What updates were completed? _____
 - c. When was the last update to the circuit panel? _____
 - d. Are there any of the following in the building?
 Aluminum wiring Knob and tube Fuses Stab-Lok panels
- 3. Roof covering
 - a. Year roof replaced: _____
 - b. What is the roof material? _____
 - c. Explain your maintenance agreement for the roof: _____
 - d. When was the last roof inspection by a licensed contractor? _____
- 4. Heating/air conditioning
 - a. Year HVAC system updated: _____
 - b. What updates were completed? _____

DECLARATION AND SIGNATURE

Authorized entity representative designation

The person named herein is authorized and designated to give and receive any and all notices on behalf of the entity and all insureds from the entity or their authorized representative(s) concerning this insurance.

Named individual: _____

Title/position: _____ Date: _____