

Property

1. Business Name: _____
2. Description of operations: _____

Construction

3. # of stories: ____ **Construction:** (____)Frame (____)JM (____)Fire Res. (____)MNC (____)NC (____)Other: _____
4. Is there any EIFS, Dryvit or similar exterior construction present? (____)Yes (____)No
- 4a. EIFS type systems are prohibited. (EIFS used for decorative or ornamental purposes, call your underwriter prior to submitting)
5. **Roof Information (Must be completed to secure quote)**
- (____)Single Ply Membrane (____)Built-up (____)Shingles - (55 MPH Rated) (____)Shingles - (110 MPH Rated)
(____)Concrete Tile (____)Clay Tiles (____)Wood Shingles (____)Metal (____)Other: _____
6. Age of roof: (last replacement or update) _____ Are there roof anchor or hurricane straps? Yes ____ No ____

Roof Geometry: (See description of roof types on page 2)

- (____)Hip (____)Gable (____)Flat with Mansard (____)Monoslope (____)Flat (____)Mono-Slope (____) Other
7. If roof is flat is there any equipment attached? (describe) _____
8. Is equipment securely anchored to the roof? Yes ____ No ____ Are there hurricane shutters/panels? Yes ____ No ____
9. Are the building(s) windows and or doors made of IMPACT GLASS? Yes ____ No ____

Renovations / Updates

10. Are any renovations currently being performed to the exterior or interior of the building(s)? _____
11. Year of updates: Plumbing ____ Electrical ____ HVAC ____ Water heaters ____ Gas or electric? ____
12. Gut Renovations: Year ____ Details _____

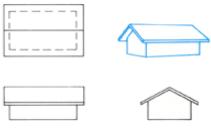
Fire Protection

13. Sprinklered? None ____ Fully ____ If partial, describe areas protected: _____
14. Smoke detectors? Yes ____ No ____ If Yes: Hardwired ____ Battery ____
- If battery, are measures taken to maintain and keep operational? _____ If yes, by whom? _____
15. Fire Extinguishers on each floor? Yes ____ No ____ In each unit? Yes ____ No ____

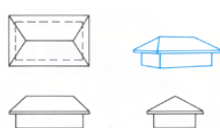
Warehouse Property Supplemental

16. List any mold, hidden decay or collapse losses paid or reported:
17. ATTACH A COPY OF RENT ROLL OR TENANT OCCUPANCY
18. ATTACH A PLOT PLAN OR DIAGRAM OF THE PREMISES SHOWING THE DISTANCES BETWEEN BUILDINGS
19. ATTACH A STATEMENT OF VALUES

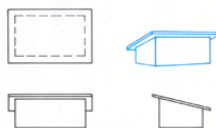
Gable Roof



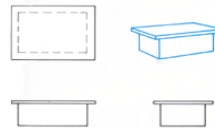
Hip Roof



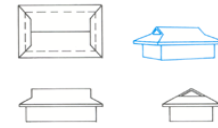
Slope Roof



Flat Roof



Dutch Hip Roof



Supplemental Warehouse questions

1. Any Manufacturing? Yes___ No___ Fully Enclosed Building? Yes___ No___ Located at or Nearby Any Major Airport? Yes___ No___
4. Type of Packaging/Storage Material: Paper___ Cardboard___ Plastic___ Other_____
5. Storage Arrangement? Vertical:___ Horizontal:___ Diagonal:___ Pallet:___ Rack:___ Solid Pile:___ Other:_____
6. List all chemicals/flammables, if any, with Flashpoints < 100° Fahrenheit, days and quantity (gallons/drums) stored.
(Please attach list)_____
7. UL approved flammable/chemical storage cabinets and/or containers: Yes___ No___
8. What commodities (i.e. fireworks, flammables, explosives, etc.) are stored or distributed:_____
9. Forklifts Yes___ No___ If yes, how many _____ Crane (Collapse Exposure): Yes___ (Type?)_____ No___

Is the property in any type of bankruptcy, receivership or in foreclosure? (___)YES (___)NO

Version: 04/08/2010/JHSUM

ANSWER ALL QUESTIONS - IF THEY DO NOT APPLY, INDICATE NOT APPLICABLE

This information does not bind the applicant nor the company to complete the insurance, but it is agreed that the information contained herein shall be the basis of the contract should a policy be issued.

FRAUD WARNING

Any person who knowingly and with intent to defraud any insurance company or person to criminal and civil penalties. information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading.

APPLICANTS SIGNATURE: _____ **DATE:** _____

Name and phone number if individual to contact for inspection _____