

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 full replacement date) _____ 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

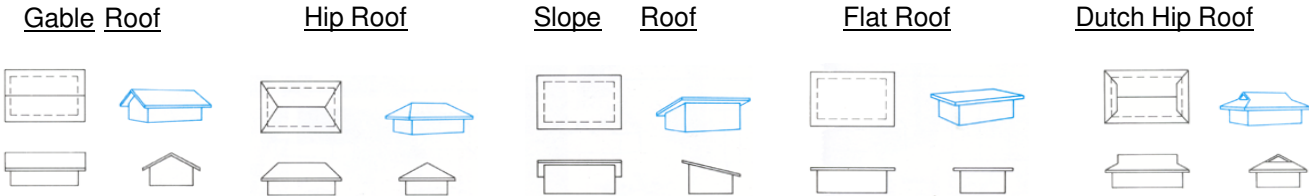
10. Are any renovations currently being performed to the exterior or interior of the building(s)? _____
11. Year of updates: Plumbing ____ Electrical ____ HVAC ____ Water heaters ____ Gas or electric? _____
12. Gut Renovations: Year ____ Details _____

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
- 20. Is there any aluminum distribution wiring to switches or outlets? Yes() No() If yes, call your underwriter



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

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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 _____