

**Property**

1. Property Name: \_\_\_\_\_
2. Property Description: \_\_\_\_\_
3. Apartments \_\_\_\_\_ Condominium \_\_\_\_\_ Homeowners Assoc \_\_\_\_\_ Other (describe) \_\_\_\_\_
4. Total # units \_\_\_\_\_ # of occupied units \_\_\_\_\_ # of rental units \_\_\_\_\_
5. If Apartments, % of student Rental \_\_\_\_\_ % of subsidized units \_\_\_\_\_
6. Avg. Monthly Rents: 1 bedroom \_\_\_\_\_ 2 bedroom \_\_\_\_\_ 3 Bedroom \_\_\_\_\_ Other \_\_\_\_\_

**Construction**

7. # of stories \_\_\_\_\_ Construction: Frame \_\_\_\_\_ Joisted Masonry \_\_\_\_\_ Fire Resistive \_\_\_\_\_ MNC \_\_\_\_\_ Other \_\_\_\_\_
8. Is there any EIFS, Dryvit or similar exterior construction present? \_\_\_\_\_
9. **Roof Information ( Must be completed to secure quote)**

Single Ply Membrane \_\_\_\_\_ Built-up \_\_\_\_\_ Shingles (55MPH Rated) Composition (110MPH Rated) Shingles \_\_\_\_\_  
Concrete Tiles / Clay Tiles \_\_\_\_\_ Wood Shingles \_\_\_\_\_ Metal \_\_\_\_\_ Other \_\_\_\_\_  
Age of roof: (last replacement or update) \_\_\_\_\_

**Roof Geometry: ( Please attach ground level color digital photos of roof showing front, side & back)**

Hip \_\_\_\_\_ Gable \_\_\_\_\_ Flat with Mansard \_\_\_\_\_ Monoslope \_\_\_\_\_ Flat \_\_\_\_\_

If roof is flat is there any equipment attached? (describe) \_\_\_\_\_

Is the equipment securely anchored to the roof? Yes \_\_\_\_\_ No \_\_\_\_\_ Roof Anchors \_\_\_\_\_

Are the building/s windows and or doors made of IMPACT GLASS? \_\_\_\_\_

**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 \_\_\_\_\_

**Recreational Facilities**

13. Type: \_\_\_\_\_ Condition: \_\_\_\_\_

**Fire Protection**

13. Sprinklered? None \_\_\_\_\_ Fully \_\_\_\_\_ Partial \_\_\_\_\_  
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 \_\_\_\_\_ Aluminum Wiring? If yes do not submit

**Additional Information required**

16. List any mold, hidden decay or collapse losses paid or reported:
17. Have there been any claims in excess of \$5,000 while under construction on the Builder's Risk Policy? \_\_\_\_\_  
If yes please provide details \_\_\_\_\_

**Agent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**SIGN HERE**

17. ATTACH A COPY OF RENT ROLL

18. ATTACH A PLOT PLAN OR DIAGRAM OF THE PREMISES SHOWING THE DISTANCES BETWEEN BUILDINGS

19. ATTACH A STATEMENT OF VALUES - (HSR spreadsheet preferred)

**TYPICAL ROOF DESIGNS**

