

Property Underwriting Questions

DWELLING SCHEDULE Additional Dwellings Supplemental Attached

	Dwelling #1	Dwelling #2	Dwelling #3	Dwelling #4
Location # (see Location Schedule)				
Attached to barn?				
Distance to Hydrant/Fire Station	/	/	/	/
Deductible Amount				
Wind/Hail Deductible %				
Building Class				
A. Dwelling Limit	_____	_____	_____	_____
B. Appurtenant Structures (10%)	_____	_____	_____	_____
C. Household Contents (70%) ⁽¹⁾	_____ <input type="checkbox"/> RC	_____ <input type="checkbox"/> RC	_____ <input type="checkbox"/> RC	_____ <input type="checkbox"/> RC
D. Loss of Use (20%)	_____	_____	_____	_____
Cause of Loss ⁽²⁾				
Extended Replacement Cost ⁽³⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dwelling Enhancement Endorsement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dwelling is Located Inside City Limits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Occupancy: Owner/Tenant/ Employee				
Full-time, Part-time or Primary?				
Year Built				
Construction Type ⁽⁴⁾				
Total Area/Area of Living Area (sq ft)	/	/	/	/
Roof Construction ⁽⁵⁾				
Year of Updates (for Dwellings over 30 years of age)	Roof _____ Heating _____ Plumbing _____ Electrical _____	Roof _____ Heating _____ Plumbing _____ Electrical _____	Roof _____ Heating _____ Plumbing _____ Electrical _____	Roof _____ Heating _____ Plumbing _____ Electrical _____
Smoke Detectors Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Burglar Alarm? ⁽⁶⁾	<input type="checkbox"/> Local <input type="checkbox"/> CS	<input type="checkbox"/> Local <input type="checkbox"/> CS	<input type="checkbox"/> Local <input type="checkbox"/> CS	<input type="checkbox"/> Local <input type="checkbox"/> CS
Fire Alarm? ⁽⁶⁾	<input type="checkbox"/> Local <input type="checkbox"/> CS	<input type="checkbox"/> Local <input type="checkbox"/> CS	<input type="checkbox"/> Local <input type="checkbox"/> CS	<input type="checkbox"/> Local <input type="checkbox"/> CS
Sprinkler System & Maint Contract?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Abbreviation Key:

- (1) RC = Replacement Cost
- (2) BA = Basic, BR = Broad, SP = Special, SP/BR = Special all other/Broad Contents
- (3) Extended Replacement Cost (*E2 Value required*) – Up to 125% Limit of Insurance for Coverage A includes Ordinance or Law Coverage
- (4) Construction Type Choose: Frame, Masonry, Steel frame, Pole or Mobile Home/Mobile Building
- (5) Type of Roof Choose: Asphalt, Fiberglass, Metal, Tile, Cedar
- (6) CS = Central Station alarm monitored by remote monitoring company