

VACANT BUILDING QUESTIONNAIRE

Addendum to Supplemental Application for Educational Institutions

(Complete for each Vacant Building)

NAMED INSURED: _____	
Name of building or use: _____	Location #: _____
Address of building: _____	
<ol style="list-style-type: none"> 1. How long has the building been vacant? _____ 2. Prior occupancy? _____ 3. Why is the building vacant? _____ 4. What does the insured intend to do with the building (sell, rent, demolish, renovate, etc.)? _____ 5. What is the anticipated date of sale, rental, demolition, renovation etc.? _____ 6. How often is the building checked? _____ By whom? _____ 7. Are the Utilities operational? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please list what utilities are operational: _____ 8. If the heat is not operational, has the insured drained the water pipes and added antifreeze to any areas where water might remain such as drain traps? <input type="checkbox"/> Yes <input type="checkbox"/> No 9. Are all doors/entry ways locked and secured? <input type="checkbox"/> Yes <input type="checkbox"/> No 10. Are all windows boarded? <input type="checkbox"/> Yes <input type="checkbox"/> No 11. Is there an operating Central Station burglar alarm? <input type="checkbox"/> Yes <input type="checkbox"/> No 12. Is there an operating Central Station fire alarm? <input type="checkbox"/> Yes <input type="checkbox"/> No 13. Is the exterior lighting functional to deter crime and vandalism? <input type="checkbox"/> Yes <input type="checkbox"/> No 14. Is there a parking lot? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, is the parking lot entrance blocked to prevent vehicles and pedestrians from entering the property? <input type="checkbox"/> Yes <input type="checkbox"/> No 15. Are there any sidewalks or other areas used by the public? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, are these areas maintained and is prompt snow removal conducted? <input type="checkbox"/> Yes <input type="checkbox"/> No 16. Is there outdoor playground equipment at this location? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, is the playground equipment being maintained and inspected daily? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, is the playground equipment fenced in and locked to prevent anyone from playing on the equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No 	