GLATFELTER PUBLIC PRACTICE℠
A Division of Glatfelter Insurance Group

Textbook insurance program

VACANT BUILDING QUESTIONNAIRE

Addendum to School Supplemental Application

(Complete for each Vacant Building)

NAMED INSURED: _____

Name of building or use: _____ Location #:

Address of building:

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? ☐ Yes ☐ 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? ☐ Yes ☐ No
9. Are all doors/entry ways locked and secured? ☐ Yes ☐ No
10. Are all windows boarded? ☐ Yes ☐ No
11. Is there an operating Central Station burglar alarm? ☐ Yes ☐ No
12. Is there an operating Central Station fire alarm? ☐ Yes ☐ No
13. Is the exterior lighting functional to deter crime and vandalism? ☐ Yes ☐ No
14. Is there a parking lot? ☐ Yes ☐ No
    If so, is the parking lot entrance blocked to prevent vehicles and pedestrians from entering the property? ☐ Yes ☐ No
15. Are there any sidewalks or other areas used by the public? ☐ Yes ☐ No
    If so, are these areas maintained and is prompt snow removal conducted? ☐ Yes ☐ No
16. Is there outdoor playground equipment at this location? ☐ Yes ☐ No
    If so, is the playground equipment being maintained and inspected daily? ☐ Yes ☐ No
    If not, is the playground equipment fenced in and locked to prevent anyone from playing on the equipment? ☐ Yes ☐ No