



PROPERTY SECTION SUPPLEMENTAL

BUILDING/PROPERTY INFORMATION CONTINUED

4. **Premises #** _____ **Building #** _____

Property Address: _____

Occupancy: _____

*** Year built/building age** _____ **Square Footage:** _____

Type of Construction: _____ Type of roof: _____

Protective devices: _____

Coverage limits: *Building:* _____ *Office Contents:* _____

Rental Income, if any: _____

Other coverage desired: _____

Desired Deductible: \$250 \$500 \$1,000

If there is a mortgagee, please provide their Name, Mailing Address, and Loan #:

*** If the building is older than 25 years, please provide the following information:**

Year wiring was updated: _____ Year Plumbing was updated: _____

Year heating was updated: _____ Year roof was updated: _____

5. Please describe the operations of your surrounding neighbors:

To the Right: _____ To the Left: _____

Behind you: _____

6. Do you desire Glass coverage? No Yes If Yes, how may panes? _____

What are the dimensions? _____

ELECTRONIC DATA PROCESSING INFORMATION

7. **Premises #** _____ **Building #** _____

What is the total value of your computer equipment?

Hardware: _____ Software: _____

If there is a Lien Holder or Loss Payee on the equipment, please list:

BUILDING/PROPERTY INFORMATION CONTINUED

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Property Address: _____

Occupancy: _____

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Type of Construction: _____ Type of roof: _____

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ELECTRONIC DATA PROCESSING INFORMATION

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What is the total value of your computer equipment?

Hardware: _____ Software: _____

If there is a Lien Holder or Loss Payee on the equipment, please list:

Comments: _____

