

Berkshire Hathaway Homestate Companies

VACANT PROPERTY SUPPLEMENTAL QUESTIONNAIRE

NAME INSURED _____ Effective Date _____

Location and Description of Property:

<u>Loc #</u>	<u>Bldg #</u>	<u>Prior Occupancy</u>	<u>Central Station Alarms</u>		<u>Sprinklered?</u>
			<u>Burglar?</u>	<u>Fire?</u>	
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Describe the surrounding area of each location (commercial, residential, industrial; well-kept?):

General condition of buildings (describe any existing damage):

How long has Named Insured owned the property? _____

How long has the property been vacant? _____

Reason for vacancy? _____

Intentions for the property? (rent, sell, occupy, demolish, etc.) _____

If intention is to rent or sell – are there any current prospects? _____

Are there any back taxes owed or tax liens on the property? _____

Is there more than one mortgage on the property? _____ How many? _____

Have any tenants been evicted in the past 90 days? _____

If yes, explain: _____

Has the Named Insured filed for bankruptcy at any time in the past 5 years? _____

Has the Named Insured had any properties foreclosed on in the past 5 years? _____

Any regular checks made on the premises? _____

If yes, by whom?

How is the property secured? _____

Will the building be undergoing any renovations? _____

If yes, explain: _____

Are the utilities operational? _____ If yes, will they remain operational during vacancy? _____

Does the insured own any other businesses or commercial properties? _____

If yes, explain: _____

Do any tenants owe any back rent or have any property remaining on premises? _____

If yes, explain: _____