

# COMMERCIAL REAL ESTATE QUESTIONNAIRE

BUSINESS NAME: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

LOCATION ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

## OWNERSHIP

\_\_\_\_ Individual \_\_\_\_ Corporation \_\_\_\_ Non-Profit Corporation \_\_\_\_ Partnership

\_\_\_\_ Other: \_\_\_\_\_

## BUILDING CHARACTERISTICS:

Construction Type: (Select) Frame \_\_\_\_\_ Brick \_\_\_\_\_ Non-Combustible \_\_\_\_\_

Number Of Units:

Number Of Stories:

Approximate Square Feet:

Annual Rental Income:

Year Built:

Year Updated: Roof \_\_\_\_\_; Electric \_\_\_\_\_, Plumbing \_\_\_\_\_, Heating/Air  
Conditioning \_\_\_\_\_

Type Of Electric: Fuses \_\_\_\_\_ Circuit Breakers \_\_\_\_\_

Type Of Heating: Boiler \_\_\_\_\_; Gas Forced Air \_\_\_\_\_; Space Heaters

Protection Devices: Smoke Detectors \_\_\_\_\_; Fire Alarms \_\_\_\_\_; Burglar Alarms \_\_\_\_\_;  
Sprinklers \_\_\_\_\_; Emergency Lighting \_\_\_\_\_

Number Of Swimming Pools: \_\_\_\_\_

Number Of Playgrounds:

Please provide a description of the property including any additions or upgrades that should be considered:

**OCCUPANCY:**

List Of Mercantile Or Retail Occupants:

List Of Any Restaurants:

If Restaurant Occupancy, Any Deep Fat Frying:

Are The Cooking Areas Protected By An Ansul System:

Number Of Section 8 Units:

Number Of Subsidized Housing Units:

Number Of Student Housing Units:

**CURRENT COVERAGES:**

Building Limit:

Contents Limit:

Deductible:

Liability Limits:

Director's & Officer's Liability Limit:

Number Of Directors And Officers:

Current Insurance Company:

Expiration Date:

Annual Premium:

Describe Any Losses Over \$5,000:

**Completion Of This Questionnaire Does Not Afford Coverage And Is Used For Quoting Purposes Only.**

**ADDITIONAL COVERAGES REQUESTED:**

WORKERS COMPENSATION, AUTOMOBILE, CRIME, UMBRELLA, OTHER