

Underwriting Questionnaire for Dwellings over 25 years old

Ins	sured Name:
Loc	cation:
Yea	ar of Construction:
Dis	stance to fire hydrant: Within 300 meters? Yes [] No []
Dis	tance to nearest fire hall:Kms
spe	any of the following have been updated since the building was constructed, please ecify the year the update occurred and answer the additional questions for each. Roof (YYYY):
	Wiring (YYYY): Copper: Yes [] No [] Aluminium: Yes [] No [] Electrical Service isamps. Fuses [] Circuit Breakers [] Any knob & tube wiring? Yes [] No []
•	Primary Heat Source: (Please select your response) [] Forced Air Gas [] Forced Air Oil [] Electric [] Other:
	Age of Furnace (YYYY):
	If oil, age of tank (YYYY):
	Location of tank:
	Auxillary Heat Source: Yes [] No [] Specify Type:
	(If a woodstove, completion of a supplementary questionnaire is necessary)
5)	Plumbing (YYYY):
	Type: Copper% ,
	Galvanized Steel%,
	Other, please specify type,,,,