



BUILDING OWNERS QUESTIONNAIRE

Named Insured

Policy/Quote Number

Location Address:

Insured's website:

1. Does the insured require all tenants to sign a lease agreement?
a. Does the lease agreement require Additional Insured status for the owner? Yes No
b. Does the lease require the tenant to indemnify and hold harmless the owner? Yes No
c. Does the insured require a Certificate of Insurance from all tenants? Yes No
2. Does the insured own or manage other property not covered on this policy? Yes No
If yes, provide: Address:
 - a. Occupancy:
 - b. Policy Number: Insurance Company:
 - c. Additional Information:
3. Total Annual Rent Receipts: \$
4. Percent of the current building area that is vacant: % Expected length of vacancy:
5. Are building renovations currently occurring? Yes No
a. If yes, please describe:
6. Provide a list of tenants within the building. Include the occupancy and square footage of each

Tenant Name	Type of Occupancy	Square Footage

7. If any commercial cooking is performed on premise, is it required and enforced that the automatic extinguishing and hood ventilation systems are serviced on a semi-annual basis? Yes No
8. Does the building owner have a maintenance staff? Yes No
a. If yes, please describe duties:
9. Does the insured contract services such as building maintenance, building repair or snow removal? Yes No
a. If yes, describe the services:
10. Does the insured sign a written contract for those services? Yes No
11. Does the contract require Additional Insured status for the owner? Yes No
12. Does the contract include an indemnity and hold harmless clause in favor of the insured? Yes No
13. Does the insured require a Certificate of Insurance from all contractors? Yes No
14. Are there any special events held on the premises?
a. If yes, describe special events:

Applicant's Signature _____ Date _____

Agent Signature _____ Date _____