

Habitational Supplement

World Insurance Associates

Insured Name:

Mailing Address:

Location Address:

Phone Number:

Website Address (Optional):

1. Has the roof been replaced? Yes No
If yes, what year?
2. Is the building 100% sprinklered? Yes No
3. Does the building have any aluminum wiring present? Yes No
4. Is there polybutylene piping in the building(s)? Yes No
5. Does the building have any knob and tube wiring? Yes No
6. Does the building(s) have any Federal Pacific (FPE)/Stab-Loc or Zinsco electrical panels? Yes No
7. Do any buildings include fuses? Yes No
8. Are any buildings currently under construction? Yes No
9. Are there at least two means of egress? Yes No
10. Does the building have wood shake shingles? Yes No
11. Does the insured's building contain a wood burning stove or wood burning fireplace? Yes No
12. Are BBQ grills used on balconies, patios, or within 10ft of the building? Yes No