Starred * information is needed to process the account.

INSURED:

Location No.	* Bldg No.	Location Name	Address Num	*Street Address	*City	*State Code	*Zip	County	Is Prop within 1000 ft of saltwater	*# of Bldgs
	1									
	2									
	3									
	4									
	5									
	6									
	7									
	8									
	9									
	10									
	11									
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	47									
	48									
	49									
	50									
	51									

Coinsurance (must be 100% if requested to waive coinsurance):					100%	100%	100%	100%											
*ISO Const	Construction Description	*# of Stories	*Orig Year Built	I&B	Personal Property Value ($)	Value $ (outdoor prop must be sch'd)	Income ($) - Applicable to Apts	*Total TIV	*Occupancy	Total # of Units	# Units per Bldg leased as Apts	*Square Footage	Percent Sprinklered	ISO Prot Class	Group1-6	Yr Bldg updated (Mand if >25 yrs)	Flood Zone (if Flood reqst'd)

CAT EXPOSED (<100 miles to Gulf or Atlantic) ** is mandatory for 5 County

*Basement	*Building Foundation	*Construction Quality	**Roof Framing/Structure	**Shape of roof	**Type of Roof Covering	*Roof strapped (if ISO 1 OR 2)	Building Maintenance	*Yr. Roof covering last repl	**Exterior Cladding	*EIFS? - Coverage warrants no EIFS	Wind Pool Eligible?	Distance to Saltwater (miles)

---------- **IF HABITATIONAL** ----------

Date added to Sched.	Is prop Owned or Mg'd	*% occupied	*% Subsidized	*Type of wiring	% Hard wired Smk Det	Credit check all tenants on file	Avg Unit Rental per month($)	City / Sub / Rural?	Onsite Grd Serv.