

**Older Dwelling Supplemental Questionnaire**

**Named Insured: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Location: \_\_\_\_\_\_\_\_\_\_ Dwelling #: \_\_\_\_\_\_\_\_ Year of Construction: \_\_\_\_\_\_\_\_\_\_\_**

**Electrical System**

**1.When was the electrical system last inspected by a licensed electrician? - \_\_\_\_\_\_\_\_\_\_**

**2.What was done to the electrical system? - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**3.Have all fuses been replaced with Circuit Breakers? Yes No**

**Plumbing**

**1.When was the plumbing system last updated? - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2.What was done when it was updated? - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**3.Water lines are:Copper**

**PVC**

**Galvanized Steel**

**Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Heating / Air Conditioning**

**1.When was the HVAC system last inspected by a licensed contractor? - \_\_\_\_\_\_\_\_\_\_**

**2.What was done when it was updated? - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**3.Type of system:Forced Air**

**Space Heaters**

**Hot Water/Steam**

**Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Roof Covering**

**1.When was the roof cover last updated? - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2.Type of material used for the roof cover? - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Completed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Ed – 03-2005