

Chris-Leef General Agency, Inc.
(913) 631-1232 (913) 631-1128 fax
(800) 548-0491 (800) 383-1235 fax
www.chris-leef.com

Renovation Questionnaire

Agency Name _____ Phone # _____

Insured's Name: _____

Mailing Address: _____

Date: _____ Age of Dwelling: _____

Construction: _____ Area (sq.ft.): _____ Protection Class: _____

Distance to Fire Dept.: _____ Paid or Volunteer: _____

Distance To Hydrant: _____ Type of Alarm System: _____

Neighborhood

Urban _____ Suburban _____ Industrial _____ Mercantile _____ Residential _____

Other (Describe) _____

Improving _____ Stable _____ Deteriorating: _____

Type of Heating

Oil _____ Gas _____ Electric _____ Other _____ When Updated _____

Type of Wiring

Conduit _____ Romex _____ BX _____ Aluminum _____ When Updated _____

Any major structural changes that affect weight-bearing walls? _____

Describe adjacent exposures i.e. distance from insured's premises, construction, occupancy.

North _____ East _____

South _____ West _____

Describe protective safeguards i.e. fencing, lighting, fire extinguishers, etc.

Dollar Amount of Renovation: _____

Builders Risk Policy # _____

REMINDER: A PHOTOGRAPH OF THE STRUCTURE IS REQUIRED.