



Environmental Health & Safety

Building & Content Insurance Underwriting Form

- Please complete all applicable sections of this form.
- Please attach a copy of the final inspection.
- Please attach a copy of the Acceptance Form from the DOI.
- Send completed form and supporting documentation EH&S, Loss Control & Insurance Analyst

Building Name & Address:

New Building:

Date Accepted by State _____
 Year Constructed _____
 Construction Cost \$ _____

Acquisition:

Date of Acquisition _____
 Year Constructed _____
 Acquisition Cost \$ _____

Method of Acquisition: _____ Purchase
 _____ Transfer
 _____ Lease
 _____ Condemnation
 _____ Donation
 _____ Other

Renovation and/or Major Addition:

Date of Acceptance/Completion _____
 Renovation/Addition Cost \$ _____
 Renovation Type: _____ Add Space
 _____ Reduce Space
 _____ Total Number of Rooms
 _____ Original Square Footage
 _____ Increased Square Footage
 _____ Decreased Square Footage

Primary Building Usage: _____
(Office, Housing, Storage, Etc.)

Building Occupant(s): _____

Gross Square Footage: _____
(The sum of all interior floor area(s))

National Historic Registry: _____ Yes _____ No

Total Number of Floors: _____ Floors Above Ground
_____ Floors Below Ground

Fire Alarm: _____ Yes _____ No

Fire Sprinkler System: _____ Yes _____ No

Primary Responding Fire Department: _____

Flood Zone: _____
(A, A1, B, C, V, X, etc.)

Heating System: Forced Air ___ Steam ___ Hot Water ___ Resist ___ Space Heater ___
None ___

Heating Fuel: Electric ___ Gas ___ Fuel Oil ___ Coal ___ Wood ___ Solar ___
Other ___

A/C System: Central ___ Window ___ None ___

Roof Construction: _____

Floor Material(s): _____

Exterior Wall Material(s): _____

Funding: General ___ Special ___

Building Coverage:

Content Coverage:

Requesting Agent: