



**INTERCITY®  
INSURANCE  
SERVICES**

### Property Information Questionnaire

Registered Names: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth (each): \_\_\_\_\_ Phone No. \_\_\_\_\_

Occupation (each): \_\_\_\_\_ Email: \_\_\_\_\_

Current insurance provider *and* policy number: \_\_\_\_\_

Expiry date: \_\_\_\_\_ # of years with *Current* Insurer \_\_\_\_\_

#### HOME details:

Year Built: \_\_\_\_\_ Detached/semi/townhouse etc. \_\_\_\_\_

No. of families in household \_\_\_\_\_ Rented dwelling? \_\_\_\_\_

Hydrant Protected?: \_\_\_\_\_ If not, provide distance to/and location to the 1<sup>st</sup> responding firehall: \_\_\_\_\_

Total Square Footage of home: (do not include the basement) \_\_\_\_\_

Style: Bungalow, 2-storey, split-level, etc.: \_\_\_\_\_

Construction Type: % brick, vinyl, etc. \_\_\_\_\_  
(% of each if mixed)

ROOF: Type i.e. asphalt/steel/tile/shakes etc.: \_\_\_\_\_ year replaced \_\_\_\_\_

Basement square footage \_\_\_\_\_ % finished \_\_\_\_\_ Custom/Standard finish

Walk-out basement? \_\_\_\_\_

Garage: attached/detached \_\_\_\_\_ 1/2/3 car \_\_\_\_\_

Other non-agricultural structures: type, construction, size (sq ft) \_\_\_\_\_

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Decks or porches: construction material & size (sq ft) \_\_\_\_\_

Pool: vinyl/concrete \_\_\_\_\_ size (sq ft) \_\_\_\_\_ fenced/locked gate? \_\_\_\_\_

No. of bathrooms, # of pieces in each **\*\* GRADE LEVEL**: \_\_\_\_\_

No. of kitchens: \_\_\_\_\_ **\*\* GRADE LEVEL** i.e. Builders Grade, Custom, Semi-Custom etc.

Fireplaces: \_\_\_\_\_ inserts: \_\_\_\_\_ Wood/stove \_\_\_\_\_ WETT Cert? \_\_\_\_\_

Flooring: % hardwood \_\_\_\_\_ % carpet \_\_\_\_\_ % ceramic \_\_\_\_\_

% vinyl \_\_\_\_\_ % laminate \_\_\_\_\_ % other details \_\_\_\_\_

Walls & Ceilings: % plaster \_\_\_\_\_ % drywall \_\_\_\_\_ % other details \_\_\_\_\_

Hot tub/Jacuzzi/jetted tub: \_\_\_\_\_ # skylights (size: small /medium /large) \_\_\_\_\_

# each-Bay windows/picture/sliding patio doors/French: \_\_\_\_\_

Central Vacuum: \_\_\_\_\_ % Intercom \_\_\_\_\_

Monitored Alarm fire, burglary or both \_\_\_\_\_

Monitoring company name/ Certificate? \_\_\_\_\_

Other upgrades (granite, custom millwork, stained glass, etc.): details \_\_\_\_\_

HEATING:

Central air-conditioning: \_\_\_\_\_ same or separate ducts: \_\_\_\_\_

Heating Type: \_\_\_\_\_ year furnace installed \_\_\_\_\_

If Oil Heat, age & location of tank \_\_\_\_\_ Oil Tank Gauge (thickness) \_\_\_\_\_

PLUMBING: % copper \_\_\_\_\_ %ABS \_\_\_\_\_ % galvanized \_\_\_\_\_

Year plumbing updated: \_\_\_\_\_

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ELECTRICAL: copper or aluminum \_\_\_\_\_ fuses or breakers \_\_\_\_\_

60/100/200 amperage: \_\_\_\_\_ year updated \_\_\_\_\_

Year Hot Water Tank updated \_\_\_\_\_

Is there a Sump Pump? Yes/no – If yes is there a Battery Backup on the pump? Yes/no \_\_\_\_\_

Is there an Automatic water shut off – yes/no \_\_\_\_\_

Backwater valve (sewer backup valve) – yes/no \_\_\_\_\_

Mortgage details: \_\_\_\_\_

**ADDITIONAL INFORMATION:**

- Resident smokers/non-smokers \_\_\_\_\_
- Business in home? Yes/no - If yes provide details of business and gross ANNUAL revenues \_\_\_\_\_ Is coverage in place? Yes/no \_\_\_\_\_
- Number of years residing at this location \_\_\_\_\_
- Any claims in the last 6 year? If yes provide date and details of the claim \_\_\_\_\_
- Any cancellations for non-payment is last 3 years – yes/no \_\_\_\_\_

**Farm Outbuilding – Agricultural**

**FARM OUTBUILDINGS** i. e. Pole barn, barn, run-in shed, arena

Item	Building #1	Building #2	Building #3	Building #4	Building #5
Year Built					
Square feet					
Occupancy					
Wall/Exterior					
Roof Type					
Heating Type					
Building Value	\$	\$	\$	\$	\$

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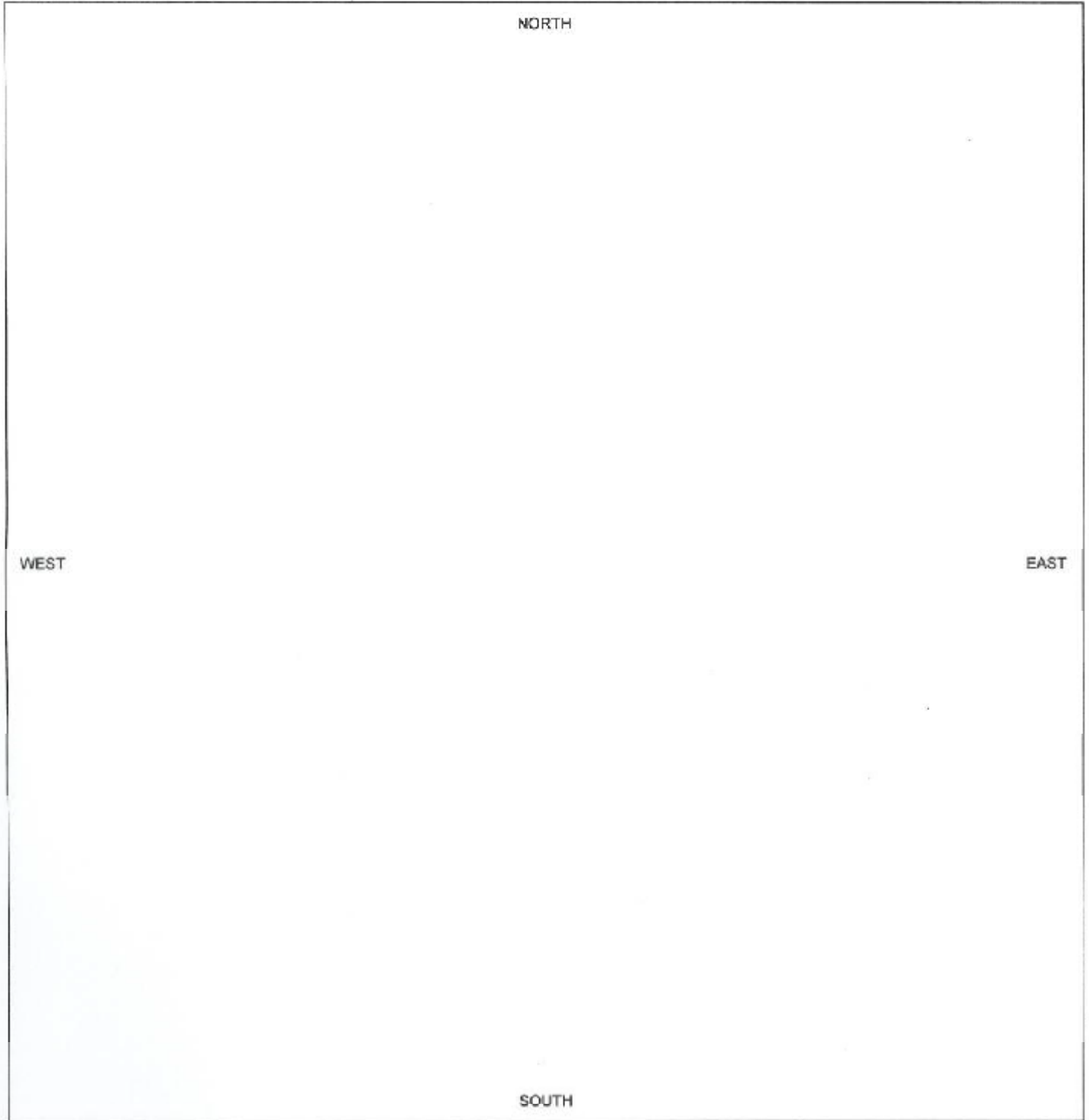
- Ø ACREAGE of farm \_\_\_\_\_
- Ø Is there a third party farming your land? Yes/no \_\_\_\_\_ If yes, how many acres farmed and annual revenues received \_\_\_\_\_
- Ø Farm Equipment – Please provide the year/make/model/serial no. and value of each unit:
  - 1) \_\_\_\_\_
  - 2) \_\_\_\_\_
  - 3) \_\_\_\_\_
  - 4) \_\_\_\_\_
- Ø Livestock i.e. horses, cattle (Named Perils only) \_\_\_\_\_
- Ø No. of horses – values of each \_\_\_\_\_
- Ø TACK Limit \_\_\_\_\_
- Ø Are any distances between insured structures less than 50 feet? If yes please provide details \_\_\_\_\_

Additional

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Completed by: \_\_\_\_\_ Dated: \_\_\_\_\_

**DRAW A DIAGRAM OF ALL BUILDINGS ON THE PREMISES.**  
INCLUDE INSURED OR UNINSURED BUILDINGS  
SHOW OCCUPANCY OF ALL BUILDINGS  
SHOW DISTANCE IN FEET OR METRES BETWEEN BUILDINGS



**Include Photographs and number them to correspond with the buildings on the diagram**