



Vacant and Unoccupied Building - Supplemental Application

AGENCY NAME:		CMR AGENCY CODE # (IF KNOWN):
POLICY EFFECTIVE DATE:	POLICY EXPIRATION DATE:	QUOTE DUE DATE:
APPLICANT NAME:		

▪ **Please provide the following information for each vacant or unoccupied building:**

• **Building Address:**

• **How is the building used?**

For Sale

Storage – What is being stored? _____

Partially Leased – To Whom? _____

Other - Please explain: _____

Undecided

• **Is building secured?** YES NO

• **Are windows boarded?** YES NO

• **What type of security precautions are used?**

Fire Alarm Burglar Alarm Central Station Local Exterior Lighting

• **Are daily rounds conducted?** YES NO

• **Is there heat in the vacant/unoccupied building?** YES NO

If so, what temperature is maintained? _____ degrees

• **Are electrical circuits and water shut off?** YES NO

• **What is the overall condition of the building?** _____

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