



U.S. Risk Insurance Group, Inc.

HABITATIONAL LIABILITY SURVEY

NAMED INSURED: _____

POLICY # _____

LOCATION INFORMATION:

Property Name: _____

Location Address: _____

Mailing Address: _____

Contact Name: _____ Telephone: _____ # Years Owned? _____

Property Management Firm _____ # Years managed? _____

Inside City Limits? ___YES___NO Age? _____ Construction? _____

#Units? _____ # Stories? _____ If more than 3, please comment on egress, i.e., exits, stairways, and fire escapes _____

#Buildings? _____ % Occupancy? _____ If Condo or Townhome %Owner Occupied _____

Total Sq. Footage? _____ Total Annual Rents \$ _____ Rent per Sq.foot _____

Average Monthly Rents: 1 Bedroom:\$ _____ 2 Bedroom:\$ _____ 3 Bedroom,\$ _____

PROJECT INFORMATION:

Tenants: _____ % Blue Collar _____ % White Collar _____ % Families
_____ %Sr. Citizens _____ %Students

Subsidized Units? YES NO Number or %: _____

Neighborhood (CHECK ONE): _____Improving _____Stable _____Declining

RENOVATION/MOST RECENT UPDATES:

ROOF PLUMBING SIDEWALKS PARKING AREAS
Year: _____ Type: _____ Year: _____ Year: _____ Year: _____

WIRING(CHECK ONE): Copper Aluminum
If Aluminum: Pigtailed? CO-ALR? Copalum?

A/C-HEATING LAUNDRY/APPLIANCES
Year _____ Gas _____ Electric _____ Year- _____

STAIRS/BALCONIES

Distance Between Bare of Guardrails? _____ Inches Handrails? _____ Inches

HABITATIONAL SURVEY

INDEPENDENT CONTRACTORS

What work is subbed out? _____ Annual cost? _____

Certificates obtained from all subcontractors? Yes No (attach copy of certificate)

Limit Required _____

New Certificates obtained annually? _____

Where are Certificates kept? _____

SWIMMING POOLS

# Pools? _____	Yes	No
1. Lifeguards?	_____	_____
2. Underwater Lighting?	_____	_____
If yes, are GFI circuits in place?	_____	_____
How often are these inspected and by whom? _____		
Where are the maintenance records kept? _____		
3. Steps in Shallow End?	_____	_____
Handrails?	_____	_____
4. Ladder at Deep End?	_____	_____
Handrails?	_____	_____
5. Diving Boards?	_____	_____
6. Is pool area completely surrounded by building walls or a fence of at least four feet?	_____	_____
Distance between bars on fence? _____ inches		
7. Are gates or doors opening into the pool area equipped with a self-closing and self latching device?	_____	_____
8. Are the depth markings clearly marked?	_____	_____
9. Are warning signs posted and clearly visible?	_____	_____
"WARNING - NO LIFEGUARD ON DUTY" (LETTERS AT LEAST FOUR INCHES TALL)	_____	_____
"NO CHILDREN ALLOWED WITHOUT AN ADULT IN ATTENDANCE"?	_____	_____
10. Are telephone and first aid kit readily accessible to pool area?	_____	_____
11. Where is nearest phone? _____		
12. Where is first aid kit? _____		
13. Is rescue equipment, including a ring, buoy and 12 foot pole or shepherd's hook, maintained?	_____	_____
14. Is the pool area regularly inspected and any of the above that is missing or defective replaced?	_____	_____

HABITATIONAL SURVEY

OTHER RECREATIONAL FACILITIES

Type? _____

Condition? _____

Any tanning beds? _____ Yes _____ No

FIRE PROTECTION

	Yes	No
Smoke Detectors?	_____	_____
Hardwire?_____ Battery?_____		
If High Rise or more than five stories building, Is there a Central Station Fire Alarm?	_____	_____
Is building sprinkled?	_____	_____
Standpipes & hoses on each floor?.	_____	_____

SECURITY

	Yes	No
1. Have there been any Assault & Battery Incidents In or around the complex In the past five years?	_____	_____
2. Are tenants and prospective tenants informed about crimes at or near the complex? How?_____	_____	_____
3. Is there a Newsletter?..... How often?_____	_____	_____
4. Is there a notice with crime Information?	_____	_____
5. Is it signed?	_____	_____
6. Are employees, Including maintenance and management screened before hiring?	_____	_____
7. Are gaps In employment or residence history checked for potential jail time?	_____	_____
8. Are there Guards? Are they armed? Are they: Private _____Off-Duty Police _____Employee Is a certificate of Insurance obtained? (attach copy) Limits required?_____ Where Is certificate kept?_____	_____	_____
9. Are tenants required to sign a statement that no security Is provided?	_____	_____
10. Is there perimeter fencing and gates?	_____	_____
11. Are repairs and maintenance for these Items budgeted?	_____	_____
12. Is lighting adequate In parking areas, walkways and common areas?	_____	_____

HABITATIONAL SURVEY

- | | Yes | No |
|---|-------|-------|
| 13. Do exterior doors have: | | |
| a keyless bolting device? | _____ | _____ |
| a keyed deadbolt or doorjamb lock? | _____ | _____ |
| a strike plate or metal doorjamb? | _____ | _____ |
| a door viewer? | _____ | _____ |
| 14. Do sliding glass doors have: | | |
| a pin lock? | _____ | _____ |
| a security bar or working door handle latch? | _____ | _____ |
| 15. If multi-storied building, are there window screens in place? | _____ | _____ |

KEY CONTROL

- | | Yes | No |
|---|-------|-------|
| 1. Does this complex have a master key system? | _____ | _____ |
| 2. Are records kept about re-keying apartments?
Where? _____ | _____ | _____ |
| 3. Do apartment numbers appear on keys? | _____ | _____ |
| 4. Are keys coded to prevent unauthorized access to apartments? | _____ | _____ |
| 5. How long does it take to re-key a unit after tenant's request? _____ | | |
| 6. Are keys kept in locked cabinet?
If not, Where? _____ | _____ | _____ |

_____ Date

_____ Named Insured's Signature