

COMMERCIAL SELF-STORAGE – VACANT LAND SUPPLEMENTAL QUESTIONNAIRE

Named Insured:	
DBA:	
Policy Number:	
PLEASE ANSWER THE FOLLOWING QUESTIONS FOR EACH SECTION OF VACANT LAND	
1	Location: <input type="checkbox"/> Adjacent <input type="checkbox"/> Different location If location is different than the self-storage facility, please provide complete address:
2	Number of acres: _____
3	How long has vacant land been owned by the Named Insured? _____
4	Describe development plans for future self-storage:
5	Is there a FOR SALE sign on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No
6	Is vacant land completely fenced? <input type="checkbox"/> Yes <input type="checkbox"/> No
7	Is there any of the following on the land: <input type="checkbox"/> Lake <input type="checkbox"/> Pond <input type="checkbox"/> Stream <input type="checkbox"/> River <input type="checkbox"/> Junk <input type="checkbox"/> Land fill <input type="checkbox"/> Underground storage tanks (gas, etc.) <input type="checkbox"/> None
8	Buildings or dwellings on the vacant land? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please describe: _____
9	Do children have access to the lot? <input type="checkbox"/> Yes <input type="checkbox"/> No
10	Is hunting allowed on vacant land? <input type="checkbox"/> Yes <input type="checkbox"/> No
11	What has been done to minimize the attractive nuisance hazard?
12	Was an environmental study done prior to purchasing the land to investigate prior pollution exposures? <input type="checkbox"/> Yes <input type="checkbox"/> No
_____ Named Insured's Signature	_____ Date