

Property Vacancy Questionnaire

То:
Date (mm/dd/yy):
From:
Subject:
Policy Number:
Due to your request for a vacancy permit, we require the following information:
Reason for Vacancy:
Date Risk Became Vacant:
Anticipated Vacancy Period:
☐ All Contents Removed: ☐ Yes ☐ No
If No, Amount Required:
Type of Supervision:
By Whom:
How Often:
☐ Heat, Water & Hydro Off: ☐ Yes ☐ No
For Rent or Sale: For Rent For Sale No
If For Sale, Advise Name of Realtor:
Any Prospective Buyers or Tenants: Yes No
Market Value of Property:
New Mailing Address of The Executor of The Estate:
☐ Do We Have Supporting Property Business: ☐ Yes ☐ No
Please forward a photograph of the vacant dwelling with this questionnaire.

Upon receipt of a reply, we will be in a position to complete our underwriting on this risk.