

Property Insurance Questionnaire

Section "A" For All Properties

Entity Information

Entity Name:

Mailing Address:

City:	State:	Zip Code:
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Guarantor Information

Guarantor Name:

Home Address:

City:	State:	Zip Code:
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Phone Number:	Email Address:
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Date of Birth:	SS#:
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Subject Property

Loan Amount:

Property Address:

City:	State:	Zip Code:
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Year Built:	Owner Occupied: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Annual Rental Income:	Vacancy Percentage
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Construction Type: Brick Frame Other (Describe):

Last Update Year for: Roof N/A Electric N/A Plumbing N/A HVAC N/A

Burglar Alarm: <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Alarm: <input type="checkbox"/> Yes <input type="checkbox"/> No	Elevator: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Sprinklers: <input type="checkbox"/> Yes <input type="checkbox"/> No	Fireplace: <input type="checkbox"/> Yes <input type="checkbox"/> No	Pool: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Section "B" For 1-4 Family Only

Number of Units:	Total Sq. Ft
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Section "C" For 5 Family and Up Only

Number of Units:	Number of Stories:
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Total Sq. Ft.:	Parking Lot or Playground: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Section "D" For Mixed-Use Properties Only

# of Residential Units:	Total Residential Sq. Ft.:
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# of Commercial Units:	Total Commercial Sq. Ft.:
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Endorsement:

Mortgagee and Loss Payee

TBD, as Agent, ISAOA ATIMA

TBD

TBD

Additional Insured as follows:

NY Tower Capital LLC, ISAOA ATIMA

33 West 60th Street, Suite 2-1

Insurance must be in the amount of **\$Full Loan Amount** plus 100% replacement cost coverage, the **Loan #** stated on the policy.