

# HARRP – ATTN: ADIAH SWENSON

Housing Authorities Risk Retention Pool  
7111 NE 179<sup>th</sup> Street - Vancouver, WA 98686  
PHONE: (360) 574-9035 - FAX: (360) 574-9401

## PRELIMINARY UNDERWRITING QUESTIONNAIRE & PROPERTY COVERAGE CHANGE FORM (To Add or Delete Coverage)

### THIS FORM TO BE FULLY COMPLETED FOR EACH PROPERTY ACQUIRED

Submit form to HARRP 60 days prior to acquisition in order to allow time for proper risk management assessment.  
(For disposal of currently owned property, it is only necessary to provide the location and effective date.)

Please attach photo of building(s) if available, and use additional sheets if necessary.

|  |  |   |                                |
|--|--|---|--------------------------------|
| <input type="checkbox"/> Full Coverage | <input type="checkbox"/> E&O Only (tax credit) | <input type="checkbox"/> Bare Land Lots | <input type="checkbox"/> Other |
|--|--|---|--------------------------------|

HOUSING AUTHORITY: \_\_\_\_\_  
H.A. CONTACT NAME: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_  
PROPERTY NAME: \_\_\_\_\_ OWNER: \_\_\_\_\_  
PROPERTY ADDRESS: \_\_\_\_\_  
PROJECT / LOCATION NO.: \_\_\_\_\_ EFFECTIVE DATE: \_\_\_\_\_

IS THIS AN ACQUISITION REHABILITATION PROPERTY? \_\_\_\_\_

REPLACEMENT VALUE (Structure): \_\_\_\_\_ CONTENT VALUE: \_\_\_\_\_  
RENTAL INCOME (if applicable): \_\_\_\_\_ Increase Per Occurrence Lmt? \_\_\_\_\_  
NO. OF UNITS: \_\_\_\_\_ (i.e., dwelling, office, rec room, maintenance, laundry, etc.)  
NUMBER OF BUILDINGS (please identify number of units per bldg): \_\_\_\_\_  
Type: (SFR/Duplex/Office/Apts.): \_\_\_\_\_ If Group Home, number of beds: \_\_\_\_\_  
Construction Type: \_\_\_\_\_ Number of Stories: \_\_\_\_\_  
Square Feet (by building): \_\_\_\_\_ Year Built : \_\_\_\_\_

#### Fire Protection in place (check all that apply):

Sprinklers  Smoke Detector  Heat Detector  Audible Ext. Alarm  Offsite Monitoring  Fire hoses in common areas

Fire Protection Class? (Contact local fire dept for rating): \_\_\_\_\_ Distance to nearest fire station \_\_\_\_\_

Underground Storage Tank?  Yes  No Flood Plain?  Yes  No  
Swimming Pool?  Yes  No Historic Register?  Yes  No  
Playground?  Yes  No Parking Lot / Garage / Carport (circle one)

Are you aware of any previous property or liability losses at this location?  Yes  No If yes, please explain: \_\_\_\_\_

Type of roof: \_\_\_\_\_ Year last roof cover installed: \_\_\_\_\_

Has this building been renovated in the past?  Yes  No If so, when? \_\_\_\_\_

Describe renovations in detail: \_\_\_\_\_

Is this building being renovated after your purchase?  Yes  No Describe those renovations: \_\_\_\_\_

What is the value of non-cosmetic upgrades to be made? \$ \_\_\_\_\_

How long will the building be owned before improvements are made? \_\_\_\_\_

Does this building currently have tenants living in it?:  Yes  No

Was the building built for the current type of occupancy?  Yes  No If not, describe original use: \_\_\_\_\_

Year electrical wiring installed or substantially upgraded: \_\_\_\_\_

Year plumbing installed or substantially upgraded: \_\_\_\_\_

Are interior stairwells enclosed behind fire rated doors?  Yes  No

What year did inside wall fire blocks become required in this jurisdiction? \_\_\_\_\_

On multi-unit buildings, does the building contain fire blocking between units?  Yes  No

On multi-unit buildings, do party walls have two-hour fire block or better?  Yes  No

Do windows meet current height code requirements?  Yes  No

Are there any signs of water intrusion from the exterior?  Yes  No If yes, please explain: \_\_\_\_\_

Are there any signs of water leakage from the interior?  Yes  No If yes, please explain: \_\_\_\_\_

Electrical Panel Box (circle one):                      Fuses / Circuit Breakers

Does each unit have its own electrical breaker/fuse box?  Yes  No

Does the building have a boiler?  Yes  No

If so, is the boiler located below unreinforced floors with units above it?  Yes  No

Have you conducted any inspections prior to purchase?  Yes  No If yes, please attach a copy of inspection report. Who conducted the inspection(s)? \_\_\_\_\_

List any known conditions of the building that need immediate repairs and state your plans for addressing them: \_\_\_\_\_

**Depending on the property conditions listed above, HARRP reserves the right to require a specialized insurance underwriting inspection to be obtained at the expense of the Housing Authority before a final underwriting decision can be made.**