

## OLDER HOME QUESTIONNAIRE-Dwellings over 25 years old

Name of Insured: Address:		Year Built:	
ELECT	RICAL SYSTEM		
1.	Month and Year Updated		
2.	Work complete by licensed electrician? If no, by whom?	□ Yes	□ No
3.	Is all wiring connected to circuit breakers?	□ Yes	□ No
4.	Is any part of the home on fuses?	☐ Yes	□ No
5.	Has the wiring been modernized to accommodate: a. Any new appliances (stove, washer/dryer, etc.)? b. Heating or AC Systems? c. Additions or alterations to the home?	□ Yes □ Yes □ Yes	□ No
6.	100 amp or greater?	□ Yes	□ No
7.	Wiring is U/L approved copper wiring?	□ Yes	□ No
8.	Wiring and electrical system is in good condition and has not been subject to arcing, shorting out, persistent circuit breaker tripping or caused damage to property with last 10 years?	□ Yes	□ No
HEATII	NG SYSTEM		
1.	Month and Year Updated		
2.	Primary heating? □ Oil □ Gas □ Electric □ Other (	(specify)	
3.	Supplemental heating used? ☐ Yes ☐ No If yes, type: ☐ Wood or Pellet Stove ☐ Fireplace ☐ Portable Heater ☐ Other (specify)		
4.	Heating system been inspected or serviced in the last 2 years by a licensed professional?  If yes, date:	□ Yes	□ No
PLUME	BING SYSTEM AND FIXTURES		
1.	Month and Year Updated		
2.	Plumbing Type:  ☐ PVC ☐ Copper ☐ Galvanized ☐ PBC (Polybutylene) ☐ Other (specify)		
3. 4.	Have plumbing fixtures been replaced?  If yes, explain the extent of work:	□ Yes	□ No
5.	Has the plumbing been checked for leaks? Any signs of leaks?	□ Yes □ Yes	□ No
6.	Has the Water Heater been replaced in the last 15 years?	☐ Yes	□ No
7.	Is plumbing in good condition and free of leakage, rupturing or resulting water damage over the last 10 years?	☐ Yes	□ No
ROOF			
1.	Type of Roof: ☐ Composition ☐ Wood ☐ Tile ☐ Slate		
2.	☐ Tar and Gravel ☐ Metal ☐ Other (specify): _ When was the roof replaced?		