

WATER DAMAGE QUESTIONNAIRE

Insured Name: _____ **Broker:** _____
Policy#: _____ **Location Address:** _____
Postal Code: _____ **How long have you lived at/owned this location:** _____

Requirement:

Is your dwelling connected to a:

Municipal sewer system? Yes No Septic tank? Yes No

Does your basement have a backwater valve?

New style backwater valve with a flapper that protects the basement plumbing and catch basin

Older style backwater valve that protects only the catch basin

Was the backwater valve professionally installed? Yes No

Date of installation: (DD/MM/YY) _____

Do you have an automatic sump pump? Yes No

Is there a battery backup for the sump pump? Yes No

Was the sump pump professional installed? Yes No

Date of installation: (DD/MM/YY) _____

Are your downspouts connected directly to your weeping tiles or sewer drain? Yes No

If applicable, provide the distance the downspouts have been extended from your residence: _____

Prior Losses History

Has the dwelling had any basement flooding or water damage in the past 10 years?

If yes, please provide date of loss, amount of the damage and the type of damage incurred:

Date of Loss	Description of Loss	Was damage insured?	Amount of Loss	Preventative measures taken

The applicant warrants that the statements made in this questionnaire are true and accurate to the best of their knowledge.

Signature of Applicant: _____

Date: _____