

Hawaii Property Insurance Association 700 Bishop Street Suite 1100 Honolulu, HI 96813

HOMEOWNERS/DWELLING FIRE SUPPLEMENTAL QUESTIONNAIRE (REQUIRED if dwelling was built more than 30 years ago) Is Current Year minus Year Built > 30 Years?

	plicant's Name:						
Loc	eation Address:			City			
Roo	ofing material (please check all th Asphalt shingles Other (describe)	at apply):Metal	Slate	Slates	Wood :	shingles/shake	
Has	roof been completely replaced? YES, in what year?	Yes / No					
If Y Yea	Has roof has been <u>partially</u> repaired? Yes / No If YES, provide year of most recent repair & description of the most recent roof repair. Year: Description of Repair:						
	Electrical service panel contains (please check one): Circuit Breakers Pull out (or screw out) fuses Combination of circuit breakers and fuses						
Tot	Total amperage of electrical service into main panel: amps						
If Y Yea	Have any additions, updates or repairs been made to the original electrical services and/or wiring? Yes / No If YES, please describe the most recent completed work and who performed the work: Year of work: Description of work and who performed work:						
If Y Yea	Have any additions, updates or repairs been made to the original plumbing system? Yes / No If YES, please describe the extent of the most recent completed work and who performed the work: Year of work: Description of work and who performed work:						
Is th	nere any asbestos material (e.g., in	sulation, siding	, shingles, etc) pre	esent in the dwelling	? Yes/No/	Unknown	
	exterior walls wood siding, shing YES, provide the year of the most						
	es applicant have plans to update/r/ES, please describe scope of wor						
Арр	plicant's Name	A	Applicant's Signat	ure		Date	
Αge	ent's Name	A	Agent's Signature			Date	