

Named Insured _____

Policy # _____ **Effective Date:** _____

UNPROTECTED RATING QUESTIONNAIRE

1. Name of Responding Fire Department _____
Phone Number _____
Contact _____
Protection Class _____

2. Paid or Volunteer _____
Response Time _____
Are roads accessible year-round? _____
Any physical barriers? _____
Number of pumpers and pumping capacity (in gpm): _____
Number of tankers and capacity: _____

3. Is there a public hydrant w/in 1000 feet from the home? _____
If not describe the water source _____
Distance from dwelling _____
Amount of water available _____
Water source Accessible by the Fire Department year-round?

Dry Hydrant installed? _____

4. Any full-time or live-in employees _____
Is dwelling occupied daily? _____
Central Station Fire and Burglar alarm system installed and monitored? _____

5. Comments: _____