

Older Building System Update Questionnaire

Please complete below if building is 30 years or older.

Electrical:

- 100% Circuit Breakers 100% fuses With fuse stats With GFI
 100% Copper Romex or Conduit wiring Aluminum Other(describe): _____

When was the electrical system last upgraded? _____

- Complete upgrade? Partial upgrade (describe): _____

Did a licensed contractor do the work? Yes No

If inspected by a licensed contractor since, when was the electrical last inspected? _____

Plumbing:

What type of pipes does the building have? Copper Galvanized Other (describe) _____

When were the pipes last replaced? _____ Complete upgrade Partial (describe the work done): _____

When were laundry room hoses last replaced? _____

When were bathroom and Kitchen fixtures last updated? _____

Are water heaters double strapped in compliance with current earthquake codes? _____

Heating:

The primary heat source is: Central Heating Wall Heaters Floor heaters

Other (Describe): _____

The fuel used is: Gas Electric Other (describe): _____

What is the age of the furnace/boiler/heaters? _____ Are they on a service contract? Yes No

If no, when were they last inspected? _____

What supplemental heat source(s) are there? Wood Stove Coal stove Portable electric

Portable kerosene Other describe: _____

Roofing:

Age: _____ Condition: _____

Type: Asphalt Shingle Wood Shingle Tar & Gravel Tile

Other (describe): _____

Signature:

Date:

Name: