

Earthquake Questionnaire 255 N.W. Blue Parkway, Suite 102 Lee's Summit, MO 64063 Ph# (816) 251-1670 Fax# (816) 866-9223 submissions@avantsupermarketgroup.com

Questionnaire is required prior to any quote release including Earthquake Coverage. Please complete all sections or mark N/A if not applicable.

Account Name:	Location Ad	ldress:	
Does the building have on grade If yes, please provide details:	e or below grade parking?	Yes	No 🗌
Is the building located on filled If yes, please provide d		Yes 🗌	No 🗌
Is the building located on or wi If yes, please provide d		slope, ravine, or hillside?Yes	No 🗌
Is the building located within 10 If yes, please provide d		to tidal flow?Yes	No 🗌
Have all water heaters in the bu If no, please provide de		oped to ta wall/studs?Yes	No 🗌
Are there any cracks in the four If yes, please provide d		Yes _	No 🗌
	hquake incidents within the last 5 etails of incident, damage, and rep	years?Yes 🗌	No 🗌
Does the building have a contin	uous (not open) foundation?	Yes 🗌	No N/A
If built prior to 1950 has there If yes, please provide d		Yes 🗌	No 🗌 N/A 🗍
Is the premise located within 50 If yes, please provide d		Fault Line?Yes	No 🗌
Is your premise located near an	area where fracking occurs?	Yes 🗌	No 🗌
	in effect from the date of the m	or in any adjacent state, a 30-da nost recent seismic event based o	
	Richter Scale Magnitude	Radius From Epicenter	
	Less than 4.0	no restriction	
	4.0-5.9	250 miles	
	6.0 or greater	500 miles	
Agent			
Name/Signature:		Da	te:

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