

Sewer Back Up Questionnaire

Limits: as indicated on quotation

Note: This coverage is not available for dwellings without a back water valve

Named Insured _____ **Loc #** _____

1. What is the approximate age of the dwelling? _____
2. Are there any plumbing fixtures below street level?
 Yes No
3. Is the sewer line equipped with a back water valve?
 Yes No
4. Is the property serviced by public sewer or private well and septic? _____
5. If septic tank, is it cleaned out annually?
 Yes No
6. If septic tank, is it a pump or gravity system? _____
7. If the answer to 5 is NO, when was the last time the tank was cleaned out?

8. Are you aware of any previous difficulties/damage caused by sewer back up in the neighborhood?
 Yes No
9. If the answer to 8 is YES, please supply dates and details

10. If the damage was to our insured's property please indicate any changes/improvements made to the system since that time.

Date: _____ Insured Signature: _____

Broker: _____