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| **GLATFELTER COMMERCIAL AMBULANCE**  **BUILDING VALUATION FORM**  **Photos of Building Must Accompany Completed Form** |

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| --- | --- | --- | --- |
| **Submitted by:** |  | **Date:** |  |

**General Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Client Information** | |  | **Policy Information** | |
| Name: |  |  | Coverage Amount: |  |
| Location Address: |  |  | Policy Number: |  |
|  |  |  | Location Number: |  |
| City: |  |  |  |  |
| State/Zip Code: |  |  |  |  |

**Structure Information**

(Answer only the applicable information for each structure. Some fields on the worksheet do not apply for every structure.)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Structure Type:**   |  |  |  |  | | --- | --- | --- | --- | |  | Ambulance Station, Paid: | | **%** | |  | Ambulance Station, Volunteer: | | **%** | |  | Social Club: | | **%** | |  | Govt. Buildings: | | **%** | |  | Office: | | **%** | |  | Other: | | **%** | |  |  | | | | *(Check all that apply)* | |  | | | |  |  | | --- | --- | | Year Built: |  | | Total Square Footage: |  | | Ground Floor Area: |  | | Number of Floors: |  | | Perimeter: |  | | Basement Square Footage: |  | | Type:  Finished  Unfinished | | | Other Area Type *(mezzanine, balcony, etc.)* and Square Footage Amount: | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Building Code Class** |  | **Construction Type** |  |
| 1 – Frame Combustible: | **%** | Framing, Wood: | **%** |
| 2 – Joisted Masonry: | **%** | Metal Frame: | **%** |
| 3 – Noncombustible: | **%** | Masonry, Block: | **%** |
| 4 – Noncombustible (Masonry): | **%** | Masonry, Brick: | **%** |
| 5 – Modified Fire Resistive: | **%** | Other: | **%** |
| 6 – Fire Resistive:  *(Check all that apply)* | **%** | *(Check all that apply)* |  |

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| **Construction Quality** | |  |
|  | Basic – *Plain, square/rectangular, no trim or decoration* | |
|  | Average – *Typical building style for occupancy, limited trim or decoration* | |
|  | Above Average – *More complex in shape or building style with more features, trim, decoration* | |
|  | Expensive – *Complex shape/roofline, specialized/costly materials or features* | |
|  | Very Expensive – *Involves well known architect/developer, expensive or vintage features* | |
|  | Exceptional – *Unique/vintage building, extensive use of artisans, finest materials/quality* | |

**Building Exterior**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Brick veneer, standard | **%** | | Brick wall, reinforced w/ rebar | **%** | | Concrete block | **%** | | Concrete block, split face | **%** | | Metal siding, corrugated aluminum | **%** | | Siding, hardboard (wood)  Panels, cement fiber siding | **%**  **%** | | |  |  | | --- | --- | | Siding, vinyl | **%** | | Stone veneer, frame | **%** | | Stone veneer, masonry | **%** | | Stucco | **%** | | Tilt up, concrete wall | **%** | | Other  *(Check all that apply)* | **%** | |

**Foundation Type**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Concrete block | | | Poured concrete walls | | |
| Concrete slab | | | Pier and beam | | |
| Partial concrete slab | | | Other | | |
| **Slope of Site** | Flat | Slight | Moderate | Steep | Very steep |

**Roof Covering**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Corrugated Aluminum | **%** | | Metal, other than standing seam | **%** | | Metal, standing seam | **%** | | Rubber/Membrane  Built Up Tar & Gravel | **%**  **%** | | | | |  |  | | --- | --- | | Shingles, architectural (30-40 year) | **%** | | Shingles, asphalt (Composition Shingle) | **%** | | Tiles, Slate | **%** | | Other | **%** |   *(Check all that apply)* | | |
| **Roof Pitch** | Flat | Slight | | Moderate | Steep |

**HVAC**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Complete HVAC | **%** | | Electric (Metal baseboards) | **%** | | Electric, wall | **%** | | Evaporative cooling | **%** | | Floor Furnace | **%** | | Forced air unit | **%** | | Heat pump | **%** | | Hot water | **%** | | |  |  | | --- | --- | | Hot water, radiant (Floor, walls, etc.) | **%** | | Space heater (Overhead Heat Unit) | **%** | | Steam | **%** | | Steam boiler | **%** | | Ventilation | **%** | | Warmed and chilled air (Chiller) | **%** | | Warmed and cooled air (Condenser) | **%** | | None | **%** | | *(Check all that apply)* |  | |

|  |  |
| --- | --- |
| **Equipment/Contents/Other Cost Items: (if any) i.e.: Generators, Radio Towers, Etc.** | |
| Item: | |
| Item: | |
| Item: | |
| Risk Control Use Only: Equipment/Contents Percentage of Structure Value | **%** |

**Note: Attach Photos and Provide Diagram of Building  
(click on icon to attach each photo)**

|  |  |
| --- | --- |
| **Left Front OR Right Front Angle (two sides)** | **Opposite Rear Angle (two sides)** |
|  |  |

|  |  |
| --- | --- |
| **At Least Two Interior Photos: (Bay, Office Space, and Kitchen)** | |
|  |  |

**Photos of Building Must Accompany Completed Form**