

Warren County
Addition or Deletion of Property Information

Complete and send this form to:
Warren County SIF
Fax: 761-6249
Email: warrencountyinsurance@co.warren.ny.us
Phone: 761-6528

Department: _____ Phone: _____

Person submitting this form: _____

Add Effective (Date Purchased or Acquired): _____

911 Address: _____

Description: _____

Current Value/Replacement Cost: _____

If property contains building(s), complete the attached supplemental information form for each building.

Delete Effective (Date Sold): _____

Location (Town): _____

Description: _____

SUPPLEMENTAL INFORMATION FOR NEWLY ACQUIRED BUILDINGS:

This page must be completed for each building on the property before the property can be added to insurance.

Building Name: _____

Year of construction: _____ # of Stories: _____ Building Area: _____

Attic? Y / N Basement? Y / N

Heat Type: (check all that apply)

- _____ Baseboard
- _____ Forced Air
- _____ Hot Water
- _____ Heat Pumps
- _____ None
- _____ Radiant
- _____ Space / Package Unit
- _____ Wall Unit
- _____ Other _____

Fuel Source: (check all that apply)

- _____ Electric
- _____ LP Gas
- _____ Natural Gas
- _____ Oil

Alarms: (check all that apply)

- _____ Fire
- _____ Intrusion
- _____ None
- _____ Other _____

What are the alarms connected to (911, audible only, etc)? _____

Roof Type: (check all that apply)

- _____ Metal
- _____ Plastic
- _____ Rubber Membrane
- _____ Shingles
- _____ Slate
- _____ Other _____

Foundation: (check all that apply)

- Basement
- Black Top Floor
- Crawl Space
- Crushed Stone
- Dirt Floor
- Piers / Posts
- Slab
- Steel
- Other _____

Construction: (check all that apply)

- Concrete
- Fiberglass
- Fire Resistive
- Joisted Masonry
- Masonry
- Metal
- Non-Combustible
- Steel
- Wood
- Other _____