



**Dallas**  
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## HABITATIONAL QUESTIONNAIRE

1. **PROPERTY NAME:** \_\_\_\_\_
  
2. **LOCATION:** Street Address: \_\_\_\_\_  
 Age: \_\_\_\_\_ Construction: \_\_\_\_\_ No. of Buildings: \_\_\_\_\_ No. of Stories: \_\_\_\_\_  
 No. of Owner Occ. Units: \_\_\_\_\_ No. Rental Units: \_\_\_\_\_ No. of Vacant Units: \_\_\_\_\_  
 Is there any Eifs or Dryvit exterior construction present?.....  Yes  No
  
3. **ATTACH A DIAGRAM OF THE PREMISES SHOWING THE DISTANCE BETWEEN BUILDINGS.**
  
4. **ATTACH A STATEMENT OF VALUES.**
  
5. **TYPE OF PROJECT:**  Apartment  Condominium  Townhomes  HOA  Timeshare  Student Housing  
 Housing Authority? .....  Yes  No  
 Any Subsidized Units:.....  Yes  No Number or Percent: \_\_\_\_\_  
 Average Monthly Rents: 1BR: \_\_\_\_\_ 2BR: \_\_\_\_\_ 3BR: \_\_\_\_\_ Other: \_\_\_\_\_  
 In a Stable Neighborhood? .....  Yes  No
  
6. **RENOVATION/MOST RECENT UPDATES:**  
**Roof:** \_\_\_\_\_ Year: \_\_\_\_\_ Type of Shingles:  Wood  Asphalt  Tile  
 Has Roof Been Completely Replaced?.....  Yes  No Date: \_\_\_\_\_  
**Plumbing:** \_\_\_\_\_ Year: \_\_\_\_\_ Polybutylene Pipes: .....  Yes  No  
 Water Heaters: \_\_\_\_\_ Year: \_\_\_\_\_  
**Wiring:** \_\_\_\_\_ Year: \_\_\_\_\_  Copper  Aluminum  
 If Aluminum, Pigtailed?.....  Yes  No What percentage? ..... \_\_\_\_\_ %  
**A/C Heating:** \_\_\_\_\_ Year: \_\_\_\_\_ Type (check one):  Gas  Electric  
**Gut Renovation:** \_\_\_\_\_ Year: \_\_\_\_\_ Details: \_\_\_\_\_
  
7. Any Ongoing Renovations?.....  Yes  No  
 If Yes, Describe: \_\_\_\_\_  
 \_\_\_\_\_
  
8. **OTHER RECREATIONAL FACILITIES:**  
 Is barbecue use allowed on the patio/balconies or within 20 feet of the building? .....  Yes  No
  
9. **FIRE PROTECTION:**  
 Sprinklered?  None  Fully  Partial If Partial, describe the areas protected: \_\_\_\_\_  
 Smoke Detectors? .....  Yes  No Hardwired or Battery? \_\_\_\_\_  
 Fire Extinguishers? .....  Yes  No In each unit? .....  Yes  No In hallways? .....  Yes  No  
 Any Wood Stove or Fireplaces? .....  Yes  No  
 Is the Building in a Brush or Wooded Area? .....  Yes  No
  
10. **HAVE THERE BEEN ANY MOLD, HIDDEN DECAY, COLLAPSE OR WATER DAMAGE LOSSES? ...**  Yes  No  
 List Dates, Amounts and Corrective action taken: \_\_\_\_\_  
 \_\_\_\_\_  
 Advise Of Any Claim Damages That Are Not Fully Repaired: \_\_\_\_\_  
 Have There been ANY Construction Defect Losses EVER? .....  Yes  No  
 If So, Describe: \_\_\_\_\_  
 \_\_\_\_\_