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| **Educational Institution Name:** |       |

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| **Protection Class 9/10**  |
|  |
| 1. Name and address of responding Fire Department
 |       |
|  |       |
|  Response time in minutes  |       | Distance to fire station in miles |       |
| 1. Is there a mutual aid system?
 | Yes [ ]  | No [ ]  |
| 1. If “yes”, with which neighboring towns(s)?
 |       |
| 1. Are roads paved and accessible year-round?
 | Yes [ ]  | No [ ]  |
| 1. Any physical barriers?
 | Yes [ ]  | No [ ]  |
| 1. If yes, please explain
 |       |
| 1. What is the primary source of heat?
 |       |
| 1. Is there a public hydrant within 1,000 feet from the location?
 | Yes [ ]  | No [ ]  |
| 1. Describe any alternative water source inclusive to the distance of the educational institution.
 |
|  |       |
| 1. Can the responding fire department access the alternative water source at all times?
 | Yes [ ]  | No [ ]  |
| 1. Does the responding fire department have tanker and/or pumper trucks?
 | Yes [ ]  | No [ ]  |
| 1. If a water tower or storage tank is used, what is the capacity (in gallons)?
 |       |
| 1. If a lake or pond is available, how is the water provided to the building?
 |       |
|  |       |
| 1. Is an automatic fire pump accessible for use?
 | Yes [ ]  | No [ ]  |
| 1. If “yes”, are they:
 | Electric [ ]  | Gasoline [ ]   |  Steam [ ]   |
| 1. Is the water source checked on a regular basis?
 | Yes [ ]  | No [ ]  |
| 1. Are there central station smoke and/or fire alarm system installed in the building?
 | Yes [ ]  | No [ ]  |
| 1. Is the system connected directly to the fire department?
 | Yes [ ]  | No [ ]  |
|  a. If “no”, who is the monitoring company?  |       |
| 1. Is there a contract in place for scheduled testing, maintenance and repair of the systems?
 | Yes [ ]  | No [ ]  |
|   | Additional Information: |       |
|  |       |
|  |       |

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| This supplemental application becomes part of your primary application and must be signed and dated.Coverage cannot be bound until the Company approves your completed application. |

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| Signature |  | Date |