

Schools Insurance Group
Building/Contents/Portable Add/Update Form

PLEASE COMPLETE FOR (EACH) BUILDING, CONTENTS, PORTABLE

District: _____ Contact Person: _____ Phone: _____ Date: _____

School: _____ Site Number: _____ Building Name: _____

Building Address: _____ City: _____ State: _____

Zip Code: _____

I. Building Change Type: (please check appropriate box)

New Building Building Addition Demolition / Removal New Portable

II. Date of Change/Acceptance (mm/dd/yr) ____/____/____ Facility Owned Facility Leased

III. Brief Description (usage): _____

IV. Occupancy _____

V. Replacement Cost Building: _____ (excluding land, site improvements)

VI. Replacement Cost: Contents & Equipment: _____

Supplemental Building Data

Please complete this section for *New Building* and/or *Building Addition*:

Square Footage: _____ or Dimensions: _____ Year Built: _____

Automatic Sprinkler: Yes No

Intrusion Alarm: Yes No

Fire Detection System: Yes No

Fire Protection Class: _____ Construction Type: Masonry Frame # of Stories: _____

Supplemental Portable Data

Please complete this section for *New Portable*:

If portable leased, a copy of contract must be attached

Square Footage: _____ or Dimensions: _____

Foundation: _____ Yes No

Plumbing: _____ Yes No

Installation Costs: _____

Please return to Sierra Self Insurance - call if you have questions:

565 Brunswick Road, Suite 11, Grass Valley, CA 95949

PHONE: 530.274.7213

FAX: 530.273.6459