



Wawanesa
Insurance

PERSONAL LINES PROPERTY MANUFACTURED HOME QUESTIONNAIRE

Date: _____ Broker Name: _____

Insured Name: _____ Broker Number: _____

Policy Number: _____

Dwelling Location: _____

Please complete the following Manufactured Home questions:

1. Year, make & model of the dwelling? _____

2. Type of roof? _____

3. Is it tied down as per the manufacturers' specifications? Yes No

4. How is it tied down? _____

5. How is it set up? _____

6. What is the construction of the bottom frame? _____

7. Is it fully skirted? Yes No If so, what is the material used?

8. Does it have a CSA or CSA Z240 label? _____

9. What type of siding does it have? _____

10. Is interior construction metal or wood? _____ 2 x 6 walls? Yes No

11. Does it meet your regions' manufactured housing building codes? Yes No

Please include a recent photo of the Manufactured Home with the completed questionnaire.

*****Coverage is Subject to Approval*****

Completed by: _____ Date: _____