|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Exact Street Address of office location [[1]](#footnote-1):  |       | Town:  |       | Zip Code |       |
|  |  |  |  |  |  |

 Your agency’s occupancy type (check one - only the most prevalent):

 [ ] Auditorium (18); [ ] Classroom (2); [ ] Day Care (33); [ ] Dormitory (10); [ ] Gym (12); [ ] Laboratory

 (5); [ ] Maintenance Shop (6); [ ] Office (1); [ ] Retail (29); [ ] Staff Residence (11); [ ] Storage (3);

 [ ]  Vacant (4) [ ] Other - Describe:

Agency area is: [ ]  Sprinklered [ ] Not sprinklered at all

Building has a central station smoke detection system: [ ] Yes [ ] No

Building has a central station security system: [ ] Yes [ ] No

Building has an employee key card system: [ ] Yes [ ] No

**Replacement cost insurance desired: Contents $       Effective Date:**

**Questions? Call 287-3351**

**Either fax this form to 287-4008 or mail to:**

 **State of Maine, Risk Management Division, 85 State House Station, Augusta, ME 04333-0085**

1. Post office boxes and rural route numbers are unacceptable. The 911 address is required. [↑](#footnote-ref-1)