## **PROPERTY CHANGE FORM**

When new property is acquired or if property is disposed, please complete this form and mail it to:

Arthur J. Gallagher Risk Management Services, LLC – Fax (415) 536-8499 or email Jesus Aguayo Cerda - jesus\_aguayocerda@ajg.com immediate notification is necessary in order to coordinate insurance coverage.

Insurance billing/Location #	Date Prepared:					
Location Reporting Change:						
☐ School ☐ Church						
Mailing Address:						
_						
City, State, Zip Code:						
Phone #	Fax #					
Please ☐ Add / ☐ Delete the follow	ng effective:					
Address of Property:						
City, State, Zip Code						
Complete the following for Property a	dditions:					
Total Number of Buildings:	Total Number of Units:					
(If multiple buildings, a site plan is reques	ed. Please provide a breakdown of sq. footage and/or number of units per bldg.)					
Type of Construction:	Roof Construction:					
Total Building Value:						
Value Based on:	Purchase Price Construction Cost					
Number of Stories:	Total Square Footage: Year Built:					
Type Fire Protection (i.e. sprinklers, smol	e detectors, alarms, etc.)					
Is building leased to others:  Yes	No					

## PROPERTY CHANGE FORM (cont'd)

4.	Type of Building / Use						
	□ Dwelling	☐ Convent	Rectory	☐ Garage			
	☐ School	Gymnasium	Classrooms	☐ Multi Purpose			
	Church	☐ Hall	Office	☐ Storage Shed			
	Other						
Additional Information:							
Did this Property Change affect the use of any existing church or school buildings?							
☐ Yes ☐ No							
(i.e. purchase of rectory allows former rectory to become office, new church allows former church to become gym, etc.)							
If Y	If Yes above what existing building use was changed:						
Sul	omitted by:		Date:				