

**PACKAGE CHOICE™ - LOCATION CHANGE WORKSHEET (01/07)**

*This form is to be completed when you move to a new physical location or add another location, whether a home or commercial space.*

**FAX BACK TOLL FREE: (877) 956-4418  
 EMAIL: PHOTO-CHANGE@HILLUSHER.COM**

**CONTACT INFORMATION:**

<b>BUSINESS NAME:</b> _____	<b>POLICY NO:</b> _____
<b>CONTACT NAME:</b> _____	<b>PHONE:</b> _____
<b>NEW MAILING ADDRESS:</b> _____	<b>FAX:</b> _____
<b>CITY:</b> _____ <b>STATE:</b> _____ <b>ZIP:</b> _____	<b>CELL:</b> _____
<b>NEW PHYSICAL ADDRESS:</b> _____	<b>EMAIL:</b> _____
<b>CITY:</b> _____ <b>STATE:</b> _____ <b>ZIP:</b> _____	<b>WEBSITE:</b> _____

**CHANGE OF PHYSICAL LOCATION INFORMATION:**

**THIS IS LOCATION** \_\_\_\_\_ **OF** \_\_\_\_\_ **EFFECTIVE DATE OF CHANGE:** \_\_\_\_\_  
**PRIMARY CONSTRUCTION OF BUILDING USED FOR STUDIO/OFFICE (INCLUDING HOME, IF IT IS YOUR PHYSICAL LOCATION):**

WOOD FRAME     MASONRY W/ WOOD ROOF STRUCTURE     OTHER \_\_\_\_\_

**BUILDING AGE (YEARS):** \_\_\_\_\_

**IF 25+ YEARS:** YEAR IN WHICH FOLLOWING WERE UPDATED, UPGRADED OR LAST CHECKED BY A QUALIFIED TECHNICIAN? **WIRING:** \_\_\_\_\_ **PLUMBING:** \_\_\_\_\_ **ROOF:** \_\_\_\_\_ **HEATING/AC:** \_\_\_\_\_

**BASEMENT?**  YES  NO    **NUMBER OF ABOVE GROUND STORIES:** \_\_\_\_\_

**IS THIS LOCATION A RESIDENCE?**  YES  NO

**STUDIO/OFFICE IN SEPARATE STRUCTURE ON RESIDENTIAL LOT?**  YES  NO

**IF YES, REPLACEMENT COST OF THIS BUILDING?** \_\_\_\_\_

**BURGLAR/FIRE ALARM SYSTEM?**  YES  NO    **If Yes, Monitored?**  Local (Not Monitored)?

**IS THE BUILDING FIRE SPRINKLERED?**  YES  NO

**DISTANCE FROM NEAREST FIRE STATION (MILES):** \_\_\_\_\_

**DO YOU LEASE A COMMERCIAL SPACE?:**  YES  NO

**IF YES, TOTAL REPLACEMENT COST OF TENANT IMPROVEMENTS?:** \_\_\_\_\_

**DO YOU OWN A COMMERCIAL BUILDING FROM WHICH YOU RUN YOUR BUSINESS?**  YES  NO

**If yes,** what is the replacement cost value of the building? \_\_\_\_\_

**If yes,** do you have tenants?  YES  NO

**TOTAL SQUARE FEET (of home or owned comm'l bldg):** \_\_\_\_\_

**SQUARE FEET OF STUDIO/BUSINESS OFFICE (all):** \_\_\_\_\_

**IF WORKING FROM COMMERCIAL SPACE (owned or rented), DESCRIBE BUSINESSES ADJACENT TO YOUR STUDIO/OFFICE:** \_\_\_\_\_

**PLEASE PROVIDE THE TOTAL REPLACEMENT COST VALUE FOR THIS LOCATION ONLY.**

**BUSINESS PERSONAL PROPERTY/ CONTENTS AMOUNT: \$** \_\_\_\_\_  
*(Do not include scheduled camera equipment)*

**COMPUTER & MEDIA AMOUNT: \$** \_\_\_\_\_

**SIGNATURE OR TYPED NAME:** \_\_\_\_\_