

Industrial Property Risk Assessment Questionnaire

1. Property Information

Property/Facility Name

Address

Type of Facility

Primary Operation/Business

Year Built

2. Construction Details

Construction Type

Total Floor Area (sqm)

Number of Stories

3. Occupancy and Operations

Number of Employees/Occupants

Operation Hours

Are hazardous materials stored/used?

Select

If yes, please describe

4. Fire Protection

Fire Alarm System

Select

Number of Fire Extinguishers

Sprinkler System Installed?

Select

5. Security

Security System Installed?

Select

Access Control Measures

Any past incidents (fire, theft, etc.)?

Select

If yes, please describe

6. Additional Comments

Your comments or concerns