

VIRGINIA PROPERTY INSURANCE ASSOCIATION  
P. O. BOX 5568  
GLEN ALLEN, VA 23058  
(804) 591-3700 OR 1-800-899-7973

**DWELLING THEFT QUESTIONNAIRE**  
( To be attached to applications desiring theft coverage)

VPIA Policy No.: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

LOCATION  
OF PROPERTY: \_\_\_\_\_  
No. Street City or Town County State Zip

1. Type of Occupancy: Dwelling (1- 4 family) ( ) Yes ( ) No Owner Occupied: ( ) Yes ( ) No
2. Are all exterior doors, including garage doors, windows and other entrances secured with a key operated lock or other locking device? ( ) Yes ( ) No
3. Are exterior doors of solid core, at least 1 3/8" and protected by a dead bolt lock with at least a 1 inch throw? ( ) Yes ( ) No
4. Are sliding glass doors protected by a secondary locking device (Charlie Bar)? ( ) Yes ( ) No
5. Is there any business activity on the premises? ( ) Yes ( ) No
6. Have you had had a theft loss in the past 12 months? ( ) Yes ( ) No. Have you had more than one theft loss in past three years? ( ) Yes ( ) No. If yes, please give details. \_\_\_\_\_

7. Coverage Limit. (check one) ( ) \$ 2,000 ( ) \$ 3,000 ( ) \$ 4,000 ( ) \$5,000

**IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE. Signed under pains and penalties of perjury.**

\_\_\_\_\_  
Signature of Applicant or Authorized Representative

\_\_\_\_\_  
Date