



APARTMENT PROPERTY & LIABILITY SURVEY

(COMMON INFORMATION & COVER PAGE – Thirteen [13] or More Living Units) ©

PROFESSIONAL FIELD SOLUTIONS FOR UNDERWRITERS SINCE 1979.
E-Mail: Info@ampacis.com

Date Order Received: 2-FEB-2003

Order No.: 381111

Prepared For: GALAXY ASSURANCE GROUP - 20100
TRACKING No.: F-2622-55388

UNDERWRITER: PHIL LA BUSTER
PRODUCING AGENCY: SMITH-JONES-BROWN LLC

Insured: SUMMER HILLS APARTMENTS, INC.
Mail Address: P. O. BOX 888-A
City-State-Zip: LAKE BARTLETTE, MN 55999

Policy Number: 5549-1112
Survey Date: 26-FEBRUARY-2003
Surveyed By: JOHN CASH REGISTER

Survey Location: JUNCTION 2ND AVENUE & 1ST STREET
City-State-Zip: LAKE BARTLETTE, MN 55999

Loc. 1 of 1

Contact: BOB WHITE
Title: PROPERTY MANAGER

Survey Keys: = STANDARDS MET / "OK" * = NON-STANDARD CONDITIONS / COMMENTS REQUIRED

OVERVIEW of RISK

No. of Visits Required: ONE (1)

| VALUE SUBJECT | HAZARDS OF RISK | CONTROL OF HAZARDS | EXPOSURE HAZARDS | PREMISES REPAIR AND SUITABILITY | HOUSEKEEPING CONDITIONS | GRADING OF RISK |
|----------------|----------------------------------------------|--------------------------------------------------|-------------------------------------------|--------------------------------------------------|--------------------------------------------------|---------------------------------------------|
| At Risk: 100 % | <input type="checkbox"/> Light | <input checked="" type="checkbox"/> Satisfactory | <input checked="" type="checkbox"/> Light | <input checked="" type="checkbox"/> Satisfactory | <input checked="" type="checkbox"/> Satisfactory | <input type="checkbox"/> Superior |
| Building: 40 % | <input checked="" type="checkbox"/> Moderate | <input type="checkbox"/> Average | <input type="checkbox"/> Moderate | <input type="checkbox"/> Average | <input type="checkbox"/> Average | <input checked="" type="checkbox"/> Average |
| Contents: 50 % | <input type="checkbox"/> * SEVERE | <input type="checkbox"/> Sub-Standard | <input type="checkbox"/> * SEVERE | <input type="checkbox"/> Sub-Standard | <input type="checkbox"/> * Sub-Standard | <input type="checkbox"/> * Sub-Standard |

SPECIAL UNDERWRITING INFORMATION

None Requested For This Report. "Special Information" Requested by Underwriter Located at End of Report.

OPERATIONAL INFORMATION

Location Surveyed Is: PRIMARY LOCATION Secondary / Branch Location Investment Property * Other
 Business Entity Is: CORPORATION PARTNERSHIP PROPRIETORSHIP * Other
 Business Has Operated: Yrs. Mos. At This Location: Yrs. Mos.
 Insured's Interest in Property: Owner and/or Lessor Tenant / Lessee * HIGH CRIME Location

DETAILS of OPERATIONS:

- THERE ARE A TOTAL OF ♦♦ **104** ♦♦ RENTAL APARTMENT UNITS IN BUILDING.
- MULTIPLE BUILDING COMPLEX CONTAINING ♦♦ _____ ♦♦ BUILDINGS.
- NAMED INSURED or PRINCIPAL OCCUPIES UNIT or SPACE WITHIN BUILDING / COMPLEX.
- BUILDING IS STAFFED WITH : RESIDENT CARETAKER PROPERTY MANAGER RENTAL OFFICE.
- * COMMERCIAL OCCUPANCIES LOCATED IN BUILDING. (Provide details in Summary.)
- * SWIMMING POOL LOCATED ON PREMISES. (See "Swimming Pool" Supplement.)
- * CHILDRENS' PLAY AREA WITH PLAYGROUND EQUIPMENT. (Provide PHOTO and details in Summary.)

>>>>>>> PROPERTY LOCATED WITHIN CITY or MUNICIPAL LIMITS? YES * NO

Avg. No. Full Time Empls.: 3 Avg. No. Part Time Empls.: 1 Estimated Annual Payroll: \$ 85,000
 Independent Contractors Hired: YES NO Estimated Annual Rentals: \$ 998,000

| PRINCIPALS: | OFFICERS – PARTNERS – PROPRIETOR | Title | Active in Business | Inactive in Business |
|-------------|-----------------------------------------------------------------------|-------|--------------------------|--------------------------|
| | MANAGED BY BOARD of DIRECTORS WHO ARE NOT REMUNERATED. NOT RESIDENTS. | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> |

| OVERALL OPINION of RISK: | COVERAGES | Superior | Above Average | Average | Standards Are Not Met |
|------------------------------------|-----------|--------------------------|-------------------------------------|-------------------------------------|----------------------------|
| a. Property & Extended Coverage: . | | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> * |
| b. General Liability: | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> * |
| c. | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> * |



• • • Apartment Property & Casualty Survey Report • • •

SURVEY SUMMARY NARRATIVE

LOSS HISTORY:

Informant advised that there have not been any losses or claims since complex opened.

SUMMARY

SUPPLEMENTAL OPERATIONS:

Insured entity is the Owner and Lessor of this 104 unit rental apartment building. Tenants primarily mature couples; not an assisted living complex. No swimming pool. No child play area. No social / health maintenance area(s). No vehicle exposures. Later in year (2003) there will be commercial occupancies on first floor. No other operations. Principal entity has rental office occupy space in this building.

BUILDING CONSTRUCTION DETAILS:

Structure is a four (4) story Class 1 and 6 building; full basement. Age advised to be one (1) years. Bearing walls are 25% masonry and 75% wood frame types and with typical brick and vinyl siding exterior construction. Floors are concrete on first and second levels and wood joists and decking on third and fourth levels system. Roof is wood trussed and wood decking system. Structure has copper panel roof covering in satisfactory condition. General structural condition is satisfactory. Three (3) fire division(s). Property is located in a mixed light commercial and residential section of this community. Location not considered a high crime neighborhood.

Common area hall stairways are partly open from the first floor to fourth floor. Have wall surfaces of gypsum board material. This arrangement considered satisfactory for apartment buildings of this type found throughout this metropolitan area. Recommendation for change in arrangement is not submitted with this report. Building has attached exterior wood frame porches; "Capacity" placards not posted and/or required at this time.

Significant Concealed Space - NONE NOT A LARGE VOLUME * CONSIDERABLE * SEVERE

Significant Combustible Storage - NONE AVERAGE FOR OCCUPANCY * CONSIDERABLE

Fire Loading: HIGH CONSIDERABLE MODERATE LOW

Maintenance: SATISFACTORY * UNSATISFACTORY Grading Average: ABOVE AVERAGE * BELOW

PROPERTY PROTECTION:

PUBLIC: Protection provided by an ISO Class 4 fire department. Station is located within one (1) miles. There is adequate public water supplies available in immediate vicinity of building. Nearest public hydrant is 60 feet. Building is accessible on all walls.

PRIVATE FINDINGS: Automatic Sprinkler System with satisfactory and adequate alarm equipment.
 Standpipe equipment located in _____ pipe type.
 Fire Alarm system reports to CENTRAL STATION LOCAL GONG.
 Adequate number and type hand extinguishers distributed; properly mounted throughout building. Current tags are affixed.
 * No private protection provided for this property.

Protection Considered: ABOVE AVERAGE AVERAGE * UNSATISFACTORY - RECOMMENDATIONS

BUILDING HAZARDS:

SPECIAL: None at time this survey conducted.

COMMON: Heating and electrical systems found in satisfactory condition, adequately maintained and safely arranged. General housekeeping conditions found above average. Smoking controls in place are adequate and satisfactory for class of risk.

Controls Considered: ABOVE AVERAGE AVERAGE * UNSATISFACTORY - RECOMMENDATIONS

LIABILITY CONDITIONS:

Paved, smooth, level and adequately illuminated "Off-Street" parking areas; no hazards. Satisfactory sidewalks; free of hazards. No exterior stairs. Entrances clear and unobstructed. Floors are satisfactory and hazard free. Satisfactory interior stairs well maintained and adequate illuminated. Common areas have adequate illumination. Illuminated "EXIT" signs in place. U.L. listed emergency lighting system in place; tested positive. Each apartment equipped with electrical powered smoke detection alarm units; two (2) per apartment. Smoke Detector alarms in all common areas; required by municipal ordinance. Smoke alarm units fully hardwired. Carbon monoxide detectors not provided. Two (2) hydraulic elevator exposure for building; full service contract. Egress pathways considered adequate, clear and satisfactory. Snow and ice controls considered satisfactory, based on data provided by informant.

Apartments' egress to common hallway areas: do not have U.L. Listed doors; have U.L. Listed doors.

UNDER BUILDING PARKING AREA No exposure this hazard.

Each apartment has one assigned garage space.

Continuously operating automatic high volume exhaust system for this area.

SWIMMING POOL CONDITIONS: None for premise. None contemplated.

PLAYGROUND CONDITIONS: None provided. None contemplated

PUBLIC TRAFFIC & PROPERTY ACCESS: Satisfactory vehicle access. Premises are not provided with perimeter fencing. Entrance doors to common areas are all equipped with 'state of art' security system.



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SURVEY SUMMARY NARRATIVE
(Continued)

| | | | | | |
|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| EXPOSURES: | None within 500 feet.. No other significant exposures. | | | | |
| | <table border="0"> <tr> <td style="width: 20%;"><u>VANDALISM, CRIME, "GANG" ACTIVITIES:</u></td> <td>Not a factor in this area. Community is an "outer ring" suburb that is experiencing rapid growth. No gang activity. No evidence of graffiti on properties.</td> </tr> <tr> <td><u>ECONOMIC DECLINE & PROPERTY VALUES:</u></td> <td>Area is experiencing rapid growth in the area of housing. This has resulted in continual increase in property values. No known distressed areas in community.</td> </tr> </table> | <u>VANDALISM, CRIME, "GANG" ACTIVITIES:</u> | Not a factor in this area. Community is an "outer ring" suburb that is experiencing rapid growth. No gang activity. No evidence of graffiti on properties. | <u>ECONOMIC DECLINE & PROPERTY VALUES:</u> | Area is experiencing rapid growth in the area of housing. This has resulted in continual increase in property values. No known distressed areas in community. |
| <u>VANDALISM, CRIME, "GANG" ACTIVITIES:</u> | Not a factor in this area. Community is an "outer ring" suburb that is experiencing rapid growth. No gang activity. No evidence of graffiti on properties. | | | | |
| <u>ECONOMIC DECLINE & PROPERTY VALUES:</u> | Area is experiencing rapid growth in the area of housing. This has resulted in continual increase in property values. No known distressed areas in community. | | | | |

| | |
|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CONCLUSION: | Consider this to be an acceptable risk for the lines of coverage this class. No recommendations are required. No substandard or unusual conditions observed. Management was fully cooperative during survey; displayed a positive attitude toward general public and employee safety. No evidence of financial stress on business operations. |
| | RECOMMENDATIONS Required: <input checked="" type="checkbox"/> NO <input type="checkbox"/> * YES |

| | |
|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SPECIAL INFORMATION: | None required. However, it is suggested that this property be reinspected about 1-JULY-2003, to determine the type of commercial tenant that will be occupying the first floor. |
|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

GRADING of RISK: Superior Above Average Average Needs Attention Does Not Meet Standards



Apartment Property & Casualty Survey Report

PROPERTY DATA INFORMATION

Sec. 1. BUILDING CONSTRUCTION:

ISO Construction: Class 1 - 75%, Class 2 - %, Class 3 - %, Class 4 - %, Class 5 - %, Class 6 - 25%. Exterior Walls: Wood Frame 75%, Fire Resistant 25%. Floor Construction: Wood Joists & Deck, Concrete on Steel, Reinforced Concrete. Roof Construction: Wood System, Metal System. Roof Covering: Built-Up System, Membrane, Composition Shingle, Copper Panels, Slate / Tile.

Any Structural Steel Components in Building?: YES NO. If "YES," Is the Steel Protected to Meet NFPA Standards: YES NO. Age: 1 Yrs. Height: FOUR (4) Stories. Basement: YES NO. Basement Area: 34,000 Sq. Ft. Building Area: 132,210 Sq. Ft.

Sec. 2. OCCUPANCY DATA:

Table with columns: LOCATION, PRESENT OCCUPANCY, CONSIDERED HAZARDOUS. Rows: Basement (TENANT VEHICLE PARKING), First Floor (VACANT STORE AREAS), Second Floor (RENTAL APARTMENTS), Above (RENTAL APARTMENTS).

Sec. 3 - COMMON HAZARDS & CONDITIONS:

Type Heating System: HOT WATER RADIANT - ZONED. Fuel: GAS, OIL, ELECTRIC, OTHER. Type Electrical System: CONDUIT, ROMEX, BX CABLE, K & T. Plumbing Satisfactory: YES NO. Maintenance Conditions Satisfactory? YES NO N/A.

Sec. 4. SPECIAL HAZARDS:

Sub-Standard Waste Control & Disposal: NO YES N/A. Unusual Tenants' Combustible Storage: NO YES N/A. Charcoal Grilling Permitted on Wood Decks: NO YES N/A. Commercial / Professional Tenant Occupancies: NO YES N/A.

Sec. 5. PROTECTION:

PUBLIC: Paid Department, Volunteer Department, Combination Dept., Rural Fire District. Dept. Name: LAKE BARELETTE FIRE DEPARTMENT. ISO Class: 4. Nearest Hydrant: 60 Feet. Distance to Fire Station: Within ONE (1) Mile(s). PRIVATE: Automatic Sprinkler Protection, Fire Alarm Protection, Adequate Extinguishers Provided.

Sec. 6. OCCUPANCY & PROPERTY:

APARTMENTS: Occupancy Rate: 80%. Average Monthly Rent: \$ 800. Average Value of Fixed Property Contents: \$ 1,000 PER UNIT AVG. Entity Caters To: Tenants Mostly 'Under 50', Older Tenants, Assisted Living Tenants, Tenants With Children, College Students. Insured's Interest in Non-Tenant or Fixed Property Contents: OWNER, Consignee, Bailee, No Interest, Other.

Sec. 7 EXPOSURES:

Table with columns: CONSTRUCTION, No. FLOORS, OCCUPANCY, HAZARDOUS. Rows: North, East, South, West. Exposure: NONE WITHIN 500 FEET.

PROPERTY DATA COMMENTS:

NONE REQUIRED THIS REPORT. SEE SUMMARY.

SEC. 3: ZONE HEATING SYSTEM FOR BUILDING. UNITS LOCATED ON ALL FLOORS.



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GENERAL LIABILITY DATA INFORMATION

PREMISES

YES NO N/A

- 1. PARKING AREA Approach, Access and Traffic Configuration Satisfactory ?
If 'Yes,' is PARKING AREA ... a) Paved, Smooth, Level and Free of 'Pot Holes' and Other Hazards ?
b) Provided With Adequate Illumination ?
c) Vehicle Wheel Barriers in Place Where They May be Necessary ?
d) Housekeeping Conditions Satisfactory and Cleaned on a Regular Basis ?
2. Are GARAGE SPACES OR UNITS Provided For Tenants' Vehicles ?
3. SIDEWALKS in Satisfactory Condition (no cracks, settlement) and Free of Hazards ?
4. EXTERIOR STAIRS on Premises, Free of Hazards, and Equipped With Handrailings if Required ?
5. SHRUBBERY or Other CONCEALED SPACES Where Intruder(s) Might Hide or be concealed ?
6. INTERIOR STAIRS on Premises, Free of Hazards, and Equipped with Handrailings as Required ?
7. ALL STAIRWAYS Satisfactory, in Good Repair and Adequately Illuminated as Required ?
8. FLOOR WALKING SURFACES Free of Trip, Fall and Other Hazards in Common Areas and Apartments ?
9. 'WALK OFF' MATS Provided for Main Entrances and Where Else That May Be Required ?
10. Does Building Have Balconies That are Part of Individual Apartment Units ?
If 'YES,' Are Balconies Provided With Adequate Railings ?
11. SNOW AND ICE Removal Completed as Needed and Conditions Satisfactorily Controlled ?
If 'YES,' ... a) Does Insured Have a 'Contracted Service' for Snow Removal ?
b) Name of Contractor: RIVERVIEW LAWN SERVICE Certificates Obtained: YES NO
c) How Deep Snow Accumulation Before Service Begins? TWO (2) Inches
c) How is Snow Accumulation Removed Before Service Company Begins Clearing Work?
CARETAKER WILL CLEAR ENTRANCES AND WALKS.
12. Does Management Permit Tenants to Keep PET DOGS, CATS, BIRDS, etc., on Premises ?
13. Is Any Portion of the BASEMENT Used by Tenants for RECREATIONAL PURPOSES (e.g., Game Areas, Party Rooms, etc.) ?
If 'YES,' Describe: VEHICLE PARKING ONLY - AREA: N/A Sq. Ft.

LIFE SAFETY DATA

YES NO N/A

- 14. Apartments and Common Areas Equipped With SMOKE DETECTORS as Required by NFPA & Local Codes ?
If 'YES,' In - Each Apartment Common Areas Battery Powered Hard Wired Connected to Alarm
If CONNECTED TO ALARM is There an Alarm Signal That is AUDIBLE THROUGHOUT ENTIRE BUILDING ?
15. Could a FIRE DEVELOP RAPIDLY Due to Poor Maintenance / Housekeeping, Highly Combustible Furnishings / Contents
16. Main Entrance to Common Areas Equipped With SECURITY SYSTEM Which Can be Controlled by Tenants ?
17. SECONDARY ENTRANCES / EXITS Secured From Inside and Only Accessed From Outside With Tenant Keys ?
18. DEADBOLT LOCKS and Peepholes on All Apartment Exiting Doors ?
19. EMERGENCY LIGHTING With Battery Back Up Installed in Common Areas and Tested Regularly ?
20. Are U.L. LISTED FIRE DOORS Located at All Stairway Landing Areas ?
21. At Least TWO (2) ADEQUATE MEANS OF EGRESS Provided From All Floors ?
If 'YES,' ... a) Exits Easily Accessible and Egress Unobstructed ?
b) Maximum Distance From Farthest Apartment Door to Nearest Exit: EIGHTY (80) Feet
22. EXIT SIGNS in Place for ALL Exits, and Illuminated if Required ?
23. Are All Non-Exit Doors Clearly Marked or Signed NOT AN EXIT or STORAGE ROOM, Etc. ?
24. PANIC HARDWARE Equipped on All Exit Doors Where Required ?
25. SECURITY DEVICES in Addition to Standard Locks Provided for all PATIO DOORS ?
26. HEATING SYSTEM INSPECTED and Serviced Annually Under Maintenance Contract ?
If 'YES,' Contractor: SYSTEMS SERVICED ON 'AS REQUIRED' BASIS
27. 'Coin Operated' LAUNDRY FACILITY on Premises ?
If 'YES,' ... a) Number of: WASHERS -- TWENTY FOUR (24) DRYERS -- EIGHTEEN (18)
b) Dryer Lint Traps Cleaned After Each Use & Sign (*) Posted to Advising Cleaning ?
28. RECREATIONAL FACILITY, Exercise Room With Equipment, Party Room and/or Play Area on Premises ?
29. SWIMMING POOL (*), Wading Pool (*), Pond (*) Located on Premises ?
30. 'UNDER BUILDING' PARKING Area Provided for Tenant Automobiles ?
If 'YES,' Adequate Ventilation, Exhaust System, and Automatic Sprinkler Coverage Provided ?

LIABILITY DATA COMMENTS:

NONE REQUIRED THIS REPORT. SEE SUMMARY.

NOTE: FIRST FLOOR IS FIRE RESISTIVE. UPPER FLOORS ARE ALL WOOD FRAME.

NOTE: SECONDARY STAIRWAYS ARE ENCLOSED H.C.B. TOWERS. TWO (2) HOUR U.L. LISTED FIRE DOOR AT EACH LANDING.



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SPECIAL UNDERWRITING INFORMATION

- | | YES | NO | N/A |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------|-------------------------------------|
| 30. Are COMMON AREA and Interior Walls Satisfactory and Well Maintained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If "NO," Describe: | | | |
| 31. Any Existing STRUCTURAL BUILDING Damage, Exposed or Hidden, Observed During Survey? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: | | | |
| 32. Is All INTERIOR LIGHTING for the Common Areas, Stairway and Other Tenant Access Areas Adequate? ... | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If "NO," Describe: | | | |
| 33. Any Existing UNREPAIRED ROOF DAMAGE Observed? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: | | | |
| 34. Any Existing UNREPAIRED WATER DAMAGE Conditions Observed? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: | | | |
| 35. Are Roof Drains, GUTTERS AND DOWNSPOUTS In Satisfactory Condition? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If "NO," Describe: | | | |
| If "YES," is Downspout Location Safely Arranged and Run-Off Discharge Directed Away From Walks? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 36. Is BUILDING HEATING EQUIPMENT Contained in a Separate Fire Resistive Enclosure? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: ENCLOSED WITH FIRE RESISTIVE GYPSUM BOARD MATERIAL. 1-HOUR DOORS. | | | |
| 37. Are Any Apartment Units Provided With " FIRE PLACES "? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: | | | |
| 38. Indicate Degree of VMM Risk in area: <input checked="" type="checkbox"/> None <input type="checkbox"/> Low <input type="checkbox"/> * Moderate <input type="checkbox"/> * High | | | |
| 39. Indicate Degree of COLLAPSE Potential: <input type="checkbox"/> None <input checked="" type="checkbox"/> Low <input type="checkbox"/> * Moderate <input type="checkbox"/> * High | | | |
| 40. Indicate Degree of FLOOD Potential: <input type="checkbox"/> None <input checked="" type="checkbox"/> Low <input type="checkbox"/> * Moderate <input type="checkbox"/> * High | | | |
| 41. Does This Apartment Operation Have " SUBSIDIZED HOUSING " Occupancies? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: | | | |
| 42. Occupancy " Mix ": <input checked="" type="checkbox"/> Mid-Class <input type="checkbox"/> * Students <input type="checkbox"/> * Students | | | |
| <input checked="" type="checkbox"/> Senior Citizens <input type="checkbox"/> Children Allowed <input type="checkbox"/> Percent Vacant: 20 % | | | |
| 43. What is the AVERAGE NUMBER of Persons in Each Fire Zone? 75 | | | |
| 44. Are All FIRE ZONES(**) Accessible for Fire Department Suppression and Rescue? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If "NO," Explain: | | | |
| 45. Are There Any " ASSISTED LIVING " Facilities? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: | | | |
| 46. Does Insured Have " PROPERTY SELF-INSPECTION " Procedures in Place and Recorded? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: MAINTENANCE STAFF MAKES WEEKLY INSPECTIONS OF ALL COMMON AREAS. | | | |
| 47. If Building has Attached Exterior Wood Frame Porches, Are " CAPACITY " PLACARDS on Each Level? . | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 48. Are Procedures in Place to Warn Tenants of CRIME POTENTIAL OR CRIMINAL ACTS ? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: | | | |
| 49. Does Insured Screen All PROSPECTIVE TENANTS ? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: EXTENSIVE APPLICATION REQUIRED. ADVISED REFERENCES SPOT-CHECKED | | | |
| 50. Are WORK ORDER FORMS Used for Maintenance Work and Maintained on File? | <input checked="" type="checkbox"/> | <input type="checkbox"/> * | <input type="checkbox"/> |
| 51. Does Insured Have a Maintenance Shop / Area Within Building? | <input checked="" type="checkbox"/> * | <input type="checkbox"/> | <input type="checkbox"/> |
| 52. Does Maintenance Program Give Priority to " SECURITY RELATED " REPAIRS and/or Conditions? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: ANY SUCH REQUIRED MAINTENANCE IS ADDRESSED IMMEDIATELY. | | | |
| 53. Does Insured Have WRITTEN "APARTMENT SHOWING" GUIDELINES Implemented? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Include Copy With Report. | | | |
| 54. Does Insured Have " PEST CONTROL " Policy in Place for Building(s)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: | | | |
| If Independent Contractor Service Used, Certificates of Insurance Obtained & Required? | <input type="checkbox"/> | <input type="checkbox"/> * | <input checked="" type="checkbox"/> |
| If Independent Contractor Used, Is Their Employee(s) Properly Supervised When on Premises? | <input type="checkbox"/> | <input type="checkbox"/> * | <input checked="" type="checkbox"/> |
| 55. If Building/Complex Has " PARTY ROOM " FACILITIES , Is There a " Liquor Policy " in Force? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: | | | |
| 56. Does Insured Provide " SECURITY PERSONNEL " for Premises? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If "YES," Describe: | | | |

Evaluation of Management Controls: Superior Average * Needs Improvement

(*) See applicable Supplemental Reports.

(**) A FIRE ZONE is a 'floor' or a 'fire division' separated by horizontal exits.



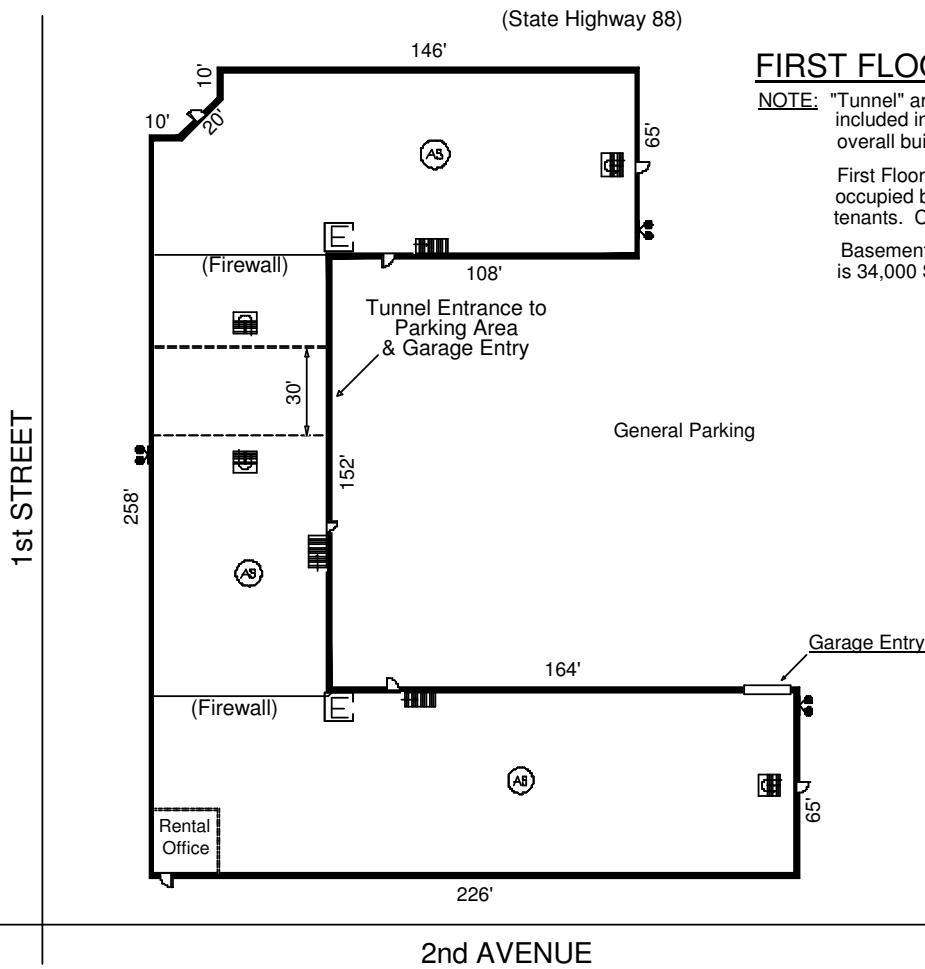
AUTOMATIC SPRINKLER SYSTEM SUPPLEMENT

SYSTEM INFORMATION:

1. Sprinkler System Is. Total Partial Automatic Other
2. Area of Building Covered by Sprinklers 166,210 S.F. 100 % of Coverage
3. Type of Sprinkler System. Wet Pipe Dry Pipe ESFR System AFFF System
 Wet Pipe Water Pressure: 120 PSI Dry Pipe Air Pressure: PSI
4. System Equipment Installed by WELLINGTON SPRINKLER SERVICE
5. Date System Installed in Building(s) SEPTEMBER 2002
6. System Designed or Suitable for Occupancy. Yes No "Pipe Schedule" Hydraulic
 If "Hydraulic" Design, State Data on Control Valve Placard: _____ ; _____ ; _____
7. Date System Was Last Inspected or Tested SCHEDULED FOR MARCH 2003
8. Is There a Service Contract in Force for System Yes No
 If "YES" Name of Service Contractor WELLINGTON SPRINKLER SERVICE
 Frequency of Service / Testing. Monthly Quarterly Semi-Annual Annual
 If YES, When: _____
9. System Have "2 Inch" a Drain Test No Yes
10. System Water Supply Line Valves Are: Chained & Locked "Open" Anti-Tamper Sensor Unprotected
11. Water Source for Sprinkler System Is Municipal Water Main Private Water Supply
12. System Piping Independent of All Other Piping Yes No
 If "YES," Booster Pump or Fire Pump. No Yes If "YES," Tested Monthly Yes No N/A
13. Is There a Water Tower, Roof Tank, or Other Water Tank or Source for System. Yes No
 If "YES," Tank Location(s) Is (Are) Roof Top Floor Next to Bldg. Other
 If "YES," Tank(s) Construction Is (Are) Steel Concrete Wood
 If "YES" Advise Freezing Protection
14. Is System Equipment, Including Air Compressor(s) If a "Dry Pipe" System, Located in a Heated Room or Enclosure Yes No
15. Type Alarm System Equipped With. Anti-Tamper Water Flow Low Air Pressure Sensor
 If "YES," Does Alarm Report To Central Station Monitored Local Gong Proprietary Station
 If "Central Station," Monitored By SMITHFIELD SECURITY SERVICE
16. "Siamese" Building Connection Located On Wall None
17. Type Sprinkler Heads for System Ordinary Type High Temperature Type (286°)
 Age of Sprinkler Heads 1 Years Actual Estimated Advised
 Any Sprinkler Heads Caged Yes No If "YES," Where: BASEMENT
 Any Heads Subject to Bumping Hazards Yes No
18. Floor Drains Provided for All Sprinklered Areas Yes No
19. Any Past Sprinkler Leakage Losses Yes No
 If "YES" Describe All Such Losses
20. Warehouse Clearance Information: Shelving: Steel Wood Tiers: Single Double Multiple None
 Aisle Widths: _____ Ft. Type Stock: _____
 Palletized Stock: None No Yes If "YES,": Encapsulated in Poly Film
21. THE NAMED INSURED IS A LESSEE/TENANT WITHIN THIS BUILDING. THEY DO NOT HAVE ANY CONTROL OVER THE SPRINKLER SYSTEM NOR DO THEY HAVE ACCESS TO THE EQUIPMENT ROOM. THE ABOVE INDICATED INFORMATION IS THE RESULT OF GENERAL OBSERVATION OF THE PROPERTY AND FROM UNVERIFIED INFORMATION PROVIDED BY THE NAMED INSURED OR THEIR REPRESENTATIVE.



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FIRST FLOOR LAYOUT

NOTE: "Tunnel" area is not included in the actual overall building area.

First Floor area is to be occupied by commercial tenants. Currently vacant.

Basement parking area is 34,000 S.F.

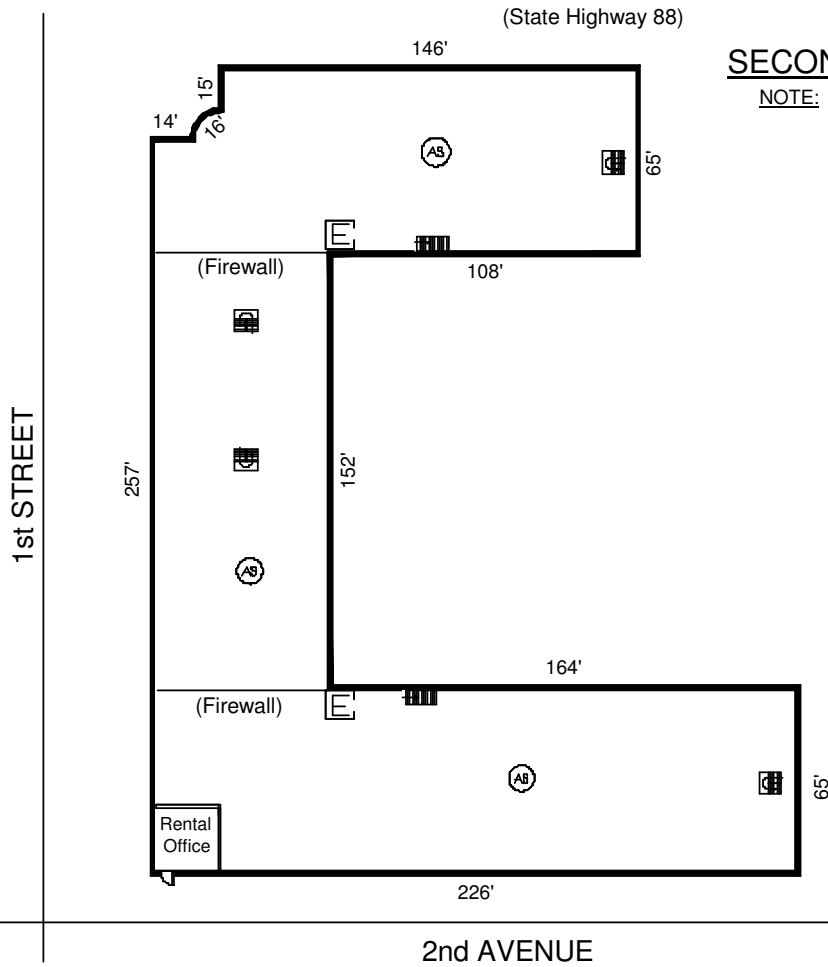
Sketch by Apex IV Windows™

Scale: 1 = 60

| AREA CALCULATIONS SUMMARY | | | | | | CONSTRUCTION DETAILS | | | | | | | | |
|---------------------------------|------------------------------------------------------|--------|-------|-----------|--------|----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------|-----------|------------------|--------------------|--------------------------|------------------------------------------------------|
| Code | Description | Factor | Size | Perimeter | Totals | | | | | | | | | |
| GBA1 | FIRST FLOOR | 1.00 | 34686 | 1224 | 34686 | WALLS: Masonry FLOOR: Concrete on Grade ROOF: See SECOND FLOOR Diagram. AGE: 1 Year | | | | | | | | |
| TOTAL BUILDING (rounded) | | | | | | 34686 | <table border="1"> <thead> <tr> <th>BUILDING CLASS</th> <th>OCCUPANCY</th> </tr> </thead> <tbody> <tr> <td>Class 1 Building</td> <td>Vacant Store Areas</td> </tr> <tr> <td>ACTUAL AREA: 33,068 S.F.</td> <td>Tunnel area is not included in the first floor area.</td> </tr> </tbody> </table> | | BUILDING CLASS | OCCUPANCY | Class 1 Building | Vacant Store Areas | ACTUAL AREA: 33,068 S.F. | Tunnel area is not included in the first floor area. |
| BUILDING CLASS | OCCUPANCY | | | | | | | | | | | | | |
| Class 1 Building | Vacant Store Areas | | | | | | | | | | | | | |
| ACTUAL AREA: 33,068 S.F. | Tunnel area is not included in the first floor area. | | | | | | | | | | | | | |



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SECOND FLOOR LAYOUT

NOTE: Third and fourth floors are not diagramed. They are similar in overall layout. Their areas are:

3rd Floor - 32,400 SF
4th Floor - 32,100 SF

The areas for the open balconies have not been deducted from floor areas.

Sketch by Apex IV Windows™

Scale: 1 = 60

| AREA CALCULATIONS SUMMARY | | | | | | CONSTRUCTION DETAILS | |
|---------------------------|-------------|--------|-------|-----------|--------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| Code | Description | Factor | Size | Perimeter | Totals | | |
| GBA1 | FIRST FLOOR | 1.00 | 34643 | 1228 | 34643 | WALLS: Wood Frame - Second through Fourth Floors FLOORS: Wood Joists & Decking ROOF: Wood Joists & Decking ROOF: Wood Joist & Deck AGE: 1 Year | |
| TOTAL BUILDING (rounded) | | | | | 34643 | BUILDING CLASS | OCCUPANCY |
| | | | | | | Class 1 Building | Rental Apartments |
| | | | | | | AREA DATA: 2nd Floor - 33,889 SF 3rd Floor - 32,400 SF 4th Floor - 32,100 SF | |



♦ ♦ ♦ Apartment Property & Casualty Survey Report – PHOTO PAGE ♦ ♦ ♦

Photo No: **1**

FRONT ELEVATION

➤ **Building Age:** 1 Years

➤ **Building**

ISO Class: 1

Special Note:

First floor only has masonry walls. All other walls are wood frame.



Photo No: **2**

REAR ELEVATION

Special Note:

Rental office is on left side of photo. It is open through the second floor level.



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DISCLAIMER: This report has been produced from observations and interview with insured or their representative unless additional sources area shown, and concerns such as conditions and practices as were observed and considered at the time of the visit to the address indicated on the first page of this report. It is not intended to indicate that there were no other exposures. This report contains information pertinent to the underwriting of the type of insurance identified in the title heading or "Type of Reports" line of report, and was prepared only for that purpose, and is not to be used for any other purpose. We do not assume any legal liability due to misinformation nor for any inaccuracies, human error, etc., nor do we assume liability for delayed report for any causes. This is a confidential report.



♦ ♦ ♦ Apartment Property & Casualty Survey Report – PHOTO PAGE ♦ ♦ ♦

Photo No: **3**

**ACCESS TUNNEL TO
PARKING AREA AND
ENTERANCE TO UNDER-
BUILDING PARKING
AREA.**

Special Note:

**This is only access way to
parking area and garage
entry.**

