

P.O. Box 596 Castroville, Texas 78009 apiaprotects.com

Insured's Name *	Loan Number *				
Property Address *	City *	k	State *	Zip *	
Insured Value *	Inspec	ctor's Name *_			
Inspector's Phone Number *					
Date of Inspection *					
Describe Interior *					
Describe Exterior *					
Are all windows secured? *	Yes	No			
Are all windows damaged? *	Yes	No			
Are blinds in the window? *	Yes	No			
Are all doors locked? *	Yes	No			
Date grass was last mowed *					
Are trees trimmed and is any growth onto the non-owned property removed? * Yes No					
Are there any sidewalks that are une	-	•		h? *	
Are there any loose hand railings, lo	se bricl Yes	ks/stone, or crac No	cked boards? *		
Is there any asbestos, lead paint, clea	aning n Yes	naterials, or deb No	oris on the property) *	

Phone: 1-877-752-2742

Is the electricity on? *	Yes	No		
Is the gas on? *	Yes	No		
Is the water on? *	Yes	No		
Condition of neighborhood Good Stable Fair Poor Deteriorated				
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How is routine patrol performed? *				
City Police Private Security				

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