



Electrical Inspection Questionnaire
(To be completed by a licensed electrical contractor)
Please complete the following sections and sign below

Building Owner: McKNIGHT CROSSINGS CHURCH GuideOne Policy Number: _____
Building Occupancy: CHURCH PREMISES
Building Address: 2515 S. McKNIGHT RD. City: LADUE State: MO. Zip: 63124
Old part 5V
Age of Electrical System: McK 23 years ☐ Estimated ☒ Actual
Type of Wiring: ☒ Conduit ☐ Romex ☒ BX ☐ Other

Please check Yes or No and explain any circle (O) checked in the Comments section below.

	Yes	No
1. Has the electrical system been updated since it was originally installed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Is there adequate clear space around panels, switch gear, and electrical equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Is housekeeping adequate around the panels, switch gear, and electrical equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Is the main service panel adequate for current load requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Are panels, sub-panels, and service disconnects labeled correctly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Are there any obvious over-fusing conditions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Are any covers missing from the main panel, sub panels, switchgear, raceway, or conduit fittings?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Are any circuit breakers taped or locked in the "on" position?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Are there any open spaces in any of the breaker panels?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Are there any warm circuit breakers?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Is there any evidence of an electrical arc or short (soot, char, burnt insulation, frayed wires, or odor)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. Are any screw-in fuses used?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. Are Fustats® (type "S," tamper-proof) of the proper amperage used? <input type="checkbox"/> NA	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14. Is there any visible (or does building owner have knowledge of) knob and tube wiring?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15. Are there any missing covers on junction boxes, switches, receptacles, etc.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16. Are GFCI receptacles located in areas as needed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Is there an excessive use of power strips, multi-plug, or "octopus" outlets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18. Is there improper use of extension cords?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19. Were any potential grounding issues noted during the visual inspection?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20. Are exterior electrical fixtures appropriate for exterior installation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21. Are space heaters being used?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
22. Has the building owner noted any recurring problems such as blown fuses, tripped breakers, flickering lights, and overheated appliance cords?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23. Is the wiring to the baptismal installed professionally and in good condition? <input checked="" type="checkbox"/> NA	<input type="checkbox"/>	<input type="checkbox"/>
24. Was any temporary wiring found?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
25. Are there any other deficiencies?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Comments:

1. one Federal Pacific step lock panel Replaced

Note: If additional space is needed, please check here ☐ and make additional comments on the back of this form.

Electrical Inspection Signature

At the time of my inspection, the electrical service and equipment that I was able to observe appeared to be installed according to the applicable code and maintained in accordance with best practices, unless noted above.

Your Name (please print): Michael Roth

Signature: Michael Roth

Your Company Name: MAR Electric

Today's Date: 7-7-25

Please return this completed survey to your GuideOne insurance agent for delivery to the insurance carrier.