

Name: _____
Address: _____

Phone #: _____
Email Address: _____

Date: _____

CONDO

Date of Birth: _____

Social Security #: _____

Year Built: _____ **Roof Year:** _____

Square Feet: _____

Foundation Type: Slab Crawl Basement Other _____

Townhouse: YES NO

of Units in the Building: _____

Monitored Burglar Alarm: YES NO

Sprinkler System: YES NO

<u>Roof Type</u>	
<input type="checkbox"/> Standard Asphalt	<input type="checkbox"/> Metal
<input type="checkbox"/> Architectural Asphalt	<input type="checkbox"/> _____
<u>Exterior Finish</u>	
_____ % Brick	_____ % Log
_____ % Vinyl Siding	_____ % Stone
_____ % Aluminum Siding	_____ % _____

Current Insurance Company: State Farm Allstate Farm Bureau Other _____

Expiration Date: _____

Current Premium: _____

Current Limits:

Building Personal Property \$ _____

Personal Property/Contents \$ _____

Personal Liability \$ _____

Deductible \$ _____

EARTHQUAKE COVERAGE/QUOTE

UMRELLA COVERAGE/QUOTE

SEWER & DRAIN COVERAGE (needed w/basement)

ADDITIONAL COVERAGES: _____

Jewelry, Guns, Furs, Silverware, etc.

Home Claims in past 5 years? _____

How do you pay? Monthly Quarterly Semi-Annual Annually Other _____

Occupation? HIM: _____

HER: _____

Affinity Discounts: Architects, Pilots, Accountants, Teachers, Dentist, Engineer, Firefighter, Lawyer, Librarian, Law Enforcement, Registered Nurse, Scientist, Military

Who handles your Life Insurance?: _____

Notes:

	AUTO	HOME
HIM		
HER		