

Name: _____
 Address: _____
 Phone #: _____
 Email Address: _____

Date: _____
 Date of Birth: _____
 Social Security #: _____



Year Built: _____ Roof Year: _____
 Square Feet: _____
 ☆# of Stories: _____
 ☆Foundation Type: Slab Crawl Basement Other _____
 If Basement, Walkout? YES NO
 If Basement, % Finished: _____
 Fireplace: YES NO → Wood Burning OR Gas
 Monitored Burglar Alarm: YES NO
 ☆Swimming Pool: YES NO → Fenced In?
 Trampoline: YES NO

☆Roof Type

Standard Asphalt Metal
 Architectural Asphalt _____

Exterior Finish

____ % Brick ____ % Log
 ____ % Vinyl Siding ____ % Stone
 ____ % Aluminum Siding ____ % _____

☆Garage Type

No Garage Carport
 Attached or Detached → ____ Car

Current Insurance Company: State Farm Allstate Farm Bureau Other _____

Expiration Date: _____

Current Premium: _____

Current Limits:

Replacement Cost \$ _____
 Personal Liability Limit \$ _____
 Medical Coverage \$ _____
 Deductible \$ _____

- FLOOD COVERAGE/QUOTE
 EARTHQUAKE COVERAGE/QUOTE
 UMBRELLA COVERAGE/QUOTE
 SEWER & DRAIN COVERAGE (needed w/basement)
 ADDITIONAL COVERAGES: _____
 Jewelry, Guns, Furs, Silverware, etc.

Homeowners Losses 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

Do you own or rent any other property?: _____

Would you like mortgage protection insurance?: YES NO
 If yes ⇒ Estimated Mortgage Balance: _____

Estimated Years Left on Mortgage: _____

Notes:

	AUTO	HOME
HIM		
HER		

☆ - (5) ITEMS FOR WHICH ACCURACY IS EXTREMELY IMPORTANT FOR AGM/UQI