

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 → Covered OR Fenced In?
Trampoline: YES NO

Roof Type	
<input type="checkbox"/> Standard Asphalt	<input type="checkbox"/> Metal
<input type="checkbox"/> Architectural Asphalt	<input type="checkbox"/> _____
Exterior Finish	
____ % Brick	____ % Log
____ % Vinyl Siding	____ % Stone
____ % Aluminum Siding	____ % _____
Garage Type	
<input type="checkbox"/> No Garage	<input type="checkbox"/> 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
- UMRELLA 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

Would you like a quote for Life Insurance?: _____

Notes:

	AUTO	HOME
HIM		
HER		