

REFERRED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_ SS#: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_ OCCUPATION/EMPLOYER \_\_\_\_\_

MARRIED? YES / NO NAME: \_\_\_\_\_ D.O.B. \_\_\_\_\_ SS# \_\_\_\_\_

CURRENT INS ON HOME? YES / NO COMPANY: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

LOSSES IN PAST 5 YEARS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OCCUPANCY TYPE:

OWNER: \_\_\_\_\_  
TENANT: \_\_\_\_\_  
REHAB: \_\_\_\_\_  
VACANT: \_\_\_\_\_

DATE OF PURCHASE : \_\_\_\_/\_\_\_\_/\_\_\_\_  
( mo.) ( year )

YEAR BUILT: \_\_\_\_\_ MARKET /APPRAISAL VALUE: \_\_\_\_\_

IS ELECTRICAL ON CIRCUIT BREAKERS: YES / NO  
ANY KNOB & TUBE WIRING: YES / NO

UPDATES (YEAR OF RENOVATION):

WIRING: \_\_\_\_\_  
PLUMBING: \_\_\_\_\_  
HEATING: \_\_\_\_\_  
ROOF: \_\_\_\_\_

SECURITY DEVICES: DEADBOLTS/ SMOKE DETECTORS/  
FIRE EXTINGUISHERS / ALARMS

CONDITION OF EXTERIOR OF HOME: \_\_\_\_\_

NUMBER OF STORIES: \_\_\_\_\_ TOTAL SQUARE FOOTAGE: \_\_\_\_\_

NUMBER OF FAMILIES: \_\_\_\_\_ NUMBER OF BATHROOMS: \_\_\_\_\_

STRUCTURE: \_\_\_\_BRICK \_\_\_\_VENEER \_\_\_\_ FRAME-- (Type of Siding)\_\_\_\_\_

BASEMENT? YES / NO IF YES: % FINISHED \_\_\_\_\_

GARAGE ? YES / NO IF YES: # OF CARS \_\_\_\_\_ ATTACHED / DETACHED

FIREPLACE ? YES / NO WOODBURNING STOVE ? YES / NO SPACE HEATER? YES / NO

BALCONY OR DECK ? YES / NO DIMENSIONS: \_\_\_\_\_

CENTRAL AIR ? YES / NO DO YOU OWN DOGS ? YES / NO BREED: \_\_\_\_\_

SWIMMING POOL / TRAMPOLINE / HOT TUB YES / NO LOCKED FENCE? : YES / NO

BANKRUPTCY IN PAST 5 YEARS ? YES / NO IF YES, DISCHARGE DATE: \_\_\_\_\_

BUSINESS/ DAYCARE CONDUCTED ON PREMISES ? YES / NO

IF TENANT OCC.—OWNER'S HOME ADDRESS: \_\_\_\_\_

SOME OF OUR COMPANIES DO USE CREDIT AS ONE OF MANY FACTORS IN DETERMINING THE

INSURANCE RATE, DO WE HAVE YOUR PERMISSION TO QUOTE THESE COMPANIES? YES / NO