

HOME QUOTE

DATE: ___/___/___

REFERRAL: _____

PRINCIPAL: _____

CSR: _____

APPLICANT TYPE: Dwelling/Renters/Condo

Applicant Details

Name _____ Gender _____ DOB ___/___/___ Marital Status _____

SSN _____ Education _____ Occupation _____

DL# _____ DL State _____ Phone#: _____

Address _____ City _____ County _____ Zip _____

Time @ address: _____ Email _____

Closing Date: ___/___/___

Previous Address _____ City _____ County _____ Zip _____

Time @ Address _____ Phone () - _____ Mobile () - _____ Work () - _____

Co-Applicant Information

Name _____ Gender _____ DOB ___/___/___ Marital Status _____

SSN _____ Education _____ Occupation _____

DL# _____ DL State _____ Email: _____

GENERAL POLICY INFORMATION

Credit Check Authorized Y/N Quote as Package Y/N Effective Date (new policy) ___/___/___

Expiration Date (current policy) ___/___/___ New Policy Term: 6months/ 12 months

Prior Carrier _____ Years w/ Prior Carrier _____ Years w/ Continuous Coverage _____

Underwriting

Has policy been cancelled, declined, or non-renewed in last 5 yrs: Y/N Is home under construction: Y/N

Swimming pool: Y/N Diving Board: Y/N Slide: Y/N Fence: Y/N

Trampoline on premises Y/N Dogs on premises: Y/N Business or Daycare on Premises Y/N

Breed Of Dog: _____ Total # of Children in Home: _____ Total # of Occupants in Home: _____

DWELLING ADDRESS RATING INFO

Inside City Limits Y/N

Feet From Hydrant _____ Within Fire District: Y/N

Distance from Fire Station: _____ Exterior Walls Type: _____ Roof Type: _____

Dwelling Type: _____ Construction Style: _____ Dwelling usage: _____

Year built: _____ Purchase date: _____ Square footage: _____
 Number of stories: _____ Heating Type: _____ Heating Update: _____
 Electrical update: _____ Plumbing Update: _____ Roofing Update: _____

COVERAGES

Dwelling: _____
 Est. Replacement Cost: _____
 Personal Liability: 300,000
 Medical Payments: 5,000
 All Perils Deductible: 1% Clause 1 / Clause 2

CREDITS

Multi-policy Discount
 Protective Devices **Y / N**
 Smoke Detector **Y / N**
 Fire Extinguisher **Y / N**
 Non-Smoker
 Burglar Alarm
 Monitored Certificate **Y / N**
 Retirees Credit

Dead Bolt **YES**
 Mature Discount
 Visible to Neighbor **YES**
 Retirement Community
 Manned Security
 Limited Access
 Community
 Gated Community

ENDORSEMENTS

Building Additions/Alterations
 Increased Mold
 Replacement Cost Dwelling-100
 Identity Theft
 Replacement Cost Content
 Increased limit on Jewelry
 Scheduled Personal Property

Earthquake
 Water Backup-5000
 Personal Injury
 Ordinance or Law
 Business Pursuits
 Loss Assessment
 Increased Coverage on Credit Card

STATE SPECIFIC - TX

Foundation Coverage **Y / N**
 Residence Glass
 Water Damage
 Windstorm, Hurricane & Hail Exclusion

LOSSES

DATE OF LOSS: _____

DETAILS OF LOSS: _____

DATE OF LOSS: _____

DETAILS OF LOSS: _____
