



**HOMEOWNERS**

**Customer Information:**

Name: \_\_\_\_\_  
 SS#: \_\_\_\_\_  
 DOB: \_\_\_\_\_ Age: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Occupation: \_\_\_\_\_  
 Employer: \_\_\_\_\_

**Co-Applicant:**

Name: \_\_\_\_\_  
 SS#: \_\_\_\_\_  
 DOB: \_\_\_\_\_ Age: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Occupation: \_\_\_\_\_  
 Employer: \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_ Wk # \_\_\_\_\_ Cell # \_\_\_\_\_

Property Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

New Purchase ?  Yes  No Closing Date or Date of Original Purchase: \_\_\_\_\_

Purchase Price \_\_\_\_\_ Value \_\_\_\_\_ Notes: \_\_\_\_\_

**Prior Insurance Information:**

Company Name \_\_\_\_\_  
 Renewal / Expiration Date \_\_\_\_\_  
 Annual Premium \_\_\_\_\_  
*(Copy of Prior Insurance Declaration required to give quote)*

**Claims History:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
*(List all Paid and Un-Paid Claims in the past 5 years)*

**Construction Information:**

Year Built: \_\_\_\_\_ Square Ft: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_ # of Baths: \_\_\_\_\_ # of Stories: \_\_\_\_\_

Fireplace: \_\_\_\_\_ Swimming Pool: \_\_\_\_\_ (Pool Fenced? \_\_\_\_\_, Diving Board \_\_\_\_\_, Slide \_\_\_\_\_) Pets: \_\_\_\_\_

Construction	Roof	Garage	Foundation	Occupancy	Updates	Requested Deductibles
<input type="checkbox"/> Frame	<input type="checkbox"/> Composition	<input type="checkbox"/> Attached	<input type="checkbox"/> Slab	<input type="checkbox"/> Owner	<input type="checkbox"/> Roof Age	<b>Wind</b>
<input type="checkbox"/> Brick Veneer	<input type="checkbox"/> Tile	<input type="checkbox"/> Detached	<input type="checkbox"/> Pier & Beam	<input type="checkbox"/> Tennant	<input type="checkbox"/> WPI-8	<input type="checkbox"/> 1%
<input type="checkbox"/> Stucco	<input type="checkbox"/> Wood	<input type="checkbox"/> Carport	<input type="checkbox"/> Stilts	<input type="checkbox"/> Vacant	<input type="checkbox"/> Plumbing	<input type="checkbox"/> 2%
<input type="checkbox"/> Hardi Plank	<input type="checkbox"/> Metal	<input type="checkbox"/> 1 car	<b>Alarm</b>		<input type="checkbox"/> Secondary	<input type="checkbox"/> 3%
<input type="checkbox"/> Asbestos	<input type="checkbox"/> Tar & Gravel	<input type="checkbox"/> 2 car	<input type="checkbox"/> Central	<input type="checkbox"/> Seasonal	<input type="checkbox"/> AC	<b>Fire</b>
<input type="checkbox"/> Brick (solid)	<input type="checkbox"/> Roll Roof	<input type="checkbox"/> 3 car	<input type="checkbox"/> Local	<input type="checkbox"/> Renter	<input type="checkbox"/> Heating	<input type="checkbox"/> 1%
<input type="checkbox"/> Vinyl	<input type="checkbox"/> Aluminum	<input type="checkbox"/> 4 car	<input type="checkbox"/> None	<input type="checkbox"/> Relative	<input type="checkbox"/> Painting	<input type="checkbox"/> 2%
<input type="checkbox"/>	<input type="checkbox"/> Concrete 65 yr	<input type="checkbox"/> None			<input type="checkbox"/>	<input type="checkbox"/> 3%

**Mortgage Company**

**Title Company**

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