

Home Insurance Quote Form

Date	
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Personal Information:	
Name	Address City
State Zip	Township County
Email	Phone (home) Phone (cell)
Date of Birth Spouse	e Date of Birth
Dogs? Yes No If yes, breed:	Any Smokers in the house? Yes No
Home Details:	
Current coverage Desire	d Deductible Personal Liability 100K 300K 500K
Year built Construction type	Square Footage: Main level All levels Stories
# Full Bath # Half Bath Basemen	nt
Porch Yes No Attached Yes	No Square Foot Deck Yes No Square Foot
Fireplace Yes No Wood Stove	Yes No Pellet Stove Yes No Air Conditioning Yes No
Garage Yes No Attached D	etached # of stalls Detached / Outside Structures Yes No
Swimming Pool Yes No Diving B	oardYesNo SlideYesNo FenceYesNo
Hot Tub Yes No Fence Yes	No Trampoline Yes No
Dead bolts Yes No Smoke detec	tors Yes No Fire extinguisher Yes No Security system Yes No
<u>Updates:</u>	
Roof No Year Elect	rical 🗌 Yes 🗌 No Year 💮 Plumbing 🗌 Yes 🗌 No Year
Furnace Yes No Year	
Special coverage for:	
RV Yes No Snowmobile Y	/es ☐ No Boat ☐ Yes ☐ No Length ☐ Art ☐ Yes ☐ No
Antiques 🗌 Yes 🗌 No Guns 🔲 Yes	☐ No Collectibles ☐ Yes ☐ No Jewelry ☐ Yes ☐ No Value ☐
Water back up & sump pump coverage	Yes No Amount If coverage declined, why?
Home business?	nts \$ Liability \$
Potential Discounts:	
College degree? Yes No Occupa	ation
Group Affiliations:	
Multiple policy discounts available in man	y cases, please provide us with the following information so we can check:
Auto insurance renewal date	Umbrella policy? Yes No Limit
Life Insurance Yes No Limit	Transferrable?

Office Use Only				
Distance to fire hydrant Distance to fire department Fire	protection class			
Medical Payments				
Mortgage Amount Mortgage Company Name and address	Loan number			
Comments				