

HOMEOWNERS INSURANCE QUOTE FORM

This is a request for a quotation for homeowners insurance. It is not an application for insurance.

To expedite your quote, please provide the following information.

All Sections must be complete in order to receive a valid quote.

N A Small Insurance Agency Services is available to residents of VA only

Name: Date of Birth: SS#:
Spouse's Name: Date of Birth: SS#:
Address: City: State: ZIP:
Property Address (if different than mailing address):

Phone Numbers: Home: Cell: Work:
Best Time to Call: Morning Afternoon Evening

Email address:

CURRENT POLICY INFORMATION

Insurance Company: Expiration Date:
Dwelling Limit: Other Structures Limit: Personal Property Limit:
Loss of Use Limit: Personal Liability Limit: Medical Pay Limit:
Deductible:

HOME INFORMATION

Date Purchased: Home is: Primary Residence Secondary Residence Rental Property
*Was home purchased as foreclosure/short sale within past 12 months? Yes No

Mortgagee:

2nd Mortgagee:

Insurance Escrowed? Yes No

Township & County of Property:

Is your home a: Single Family Home Duplex Mobile Home Modular Home (Pre-Fab)
Multi-Family - # of Families: Condo Townhouse

If Condo/Townhouse: End Unit Center Unit # of units between firewalls: (condo/tenant only)

Have you filed any property insurance claims in the past five years? Yes No

If yes, please describe below:

Table with 3 columns: Date, Type/Description, Amt. Paid

CONSTRUCTION TYPE

- | | | |
|---|---|--|
| <input type="checkbox"/> Wood Frame w/ Vinyl Siding | <input type="checkbox"/> Wood Frame w/Aluminum Siding | <input type="checkbox"/> Stucco |
| <input type="checkbox"/> Solid Brick | <input type="checkbox"/> Brick Veneer | <input type="checkbox"/> Other (Please Specify): |
| <input type="checkbox"/> Solid Stone | <input type="checkbox"/> Stone Veneer | |
| <input type="checkbox"/> Wood Siding | <input type="checkbox"/> Fire Resistant (Steel Frame) | |
| <input type="checkbox"/> Log Siding | <input type="checkbox"/> Solid Log | |

PROTECTION CLASS

Feet to Nearest Fire Hydrant: _____ Miles to Nearest Fire Station: _____ Fire District: _____

DWELLING INFORMATION

Year Dwelling Built: _____ Square Footage: _____ # of Stories: _____

Type of Dwelling: _____ (ex: cape cod, ranch, townhouse end unit, split-level, etc.)

Construction of Walls & Ceilings: Drywall Plaster If both, % of each: _____

Year Last Updated: **Wiring:** _____ **Plumbing:** _____ **Heat:** _____ **Roof:** _____

Is home 100% serviced by Circuit Breakers? Yes No

Primary Heat Source: Oil Natural Gas Propane Electric Geothermal
 Other: _____

Alternate Heat Source: Wood Stove Pellet Stove Space Heater Other: _____

If Wood/Pellet Stove, was it professionally installed? Yes No Stove Cleaned annually? Yes No

Roof Material Type: Asphalt Shingles Slate Steel/Metal Wood/Cedar Shakes
 Architectural Shingles Rubber Tin Other: _____

Roof Type: Pitched Roof Flat Roof

Foundation Type: Concrete Basement Crawlspace Slab

If Basement, is it under the entire house? Yes No

If no, what % of the house is it under? _____ What % of basement is finished? _____

Basement is: Below Grade Daylight/Walkout

Do you have a Sump Pump? Yes No

If yes, what type of backup source is used if Sump Pump fails?

Water Powered Battery Powered Gas Generator None

Attached Structures: Porch Deck Balcony Square Footage of each: _____

Garage: Yes No If yes, Capacity #: _____ Attached Detached Built-In Carport

Central Air: Yes No

Bathrooms: # Full: _____ # Half: _____

Customization in kitchen and/or bathrooms? (ex: granite countertops, custom cabinetry, tile floors, etc.) Yes No

If yes, please list: _____

PROTECTIVE DEVICES (Check all that apply)

- Fire Alarm: **Local** (makes your household aware) **Central** (notifies 3rd party)
- Burglar Alarm: **Local** (makes your household aware) **Central** (notifies 3rd party)
- Sprinkler System: **Local** (makes your household aware) **Central** (notifies 3rd party)
- Smoke Detectors** **Fire Extinguishers** **Dead Bolt Locks**

GENERAL UNDERWRITING

Do you own any dogs or exotic pets? Yes No How many: _____ Breed/Type: _____
 Any incidents of biting? Yes No

Is there a swimming pool or trampoline on the property?

- Swimming pool** **Above Ground** **In-ground** **Fenced-In** **Locking Gate**
- Trampoline** **Screened**

Do you belong to a Homeowners Association? Yes No

Do you own any Watercrafts? Yes No Type: _____ Motor HP: _____
 Docked/Stored Location: _____ Location Used: _____ Length: _____

Any Recreational Motorized Land Vehicles: Yes No Type: _____

Any Other Owned Properties? Yes No

If yes, list address: _____

Member of any Board of Directors: Yes No If yes, list: _____

Any Business Activity conducted in Home/On Premises? Yes No

If yes, type of business: _____

Any Business Property in Home/On Premises: Yes No

If yes, type/amount: _____

Any valuable items: **Jewelry** **Fine Art** **Coins** **Guns** **Silverware** **Other:**

List amount of coverage needed for each category: *(Appraisals will be required if policy is purchased)*

Would you like a quote for Flood coverage? Yes No

Would you like to discuss how a Personal Umbrella Policy can benefit you? Yes No

Would you like a quote on Life Insurance options? Yes No

Additional Information/Comments:

As part of the underwriting process, insurance companies will order an insurance score based upon your credit history that will be used to underwrite and price your policy. As allowed by law, they may obtain credit and other consumer reports, such as claims history reports, in connection with your application for insurance and any renewal of insurance.