

# Homeowners/Renters Insurance

1) Owner/Renter's Name: \_\_\_\_\_

2) Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) Phone: \_\_\_\_\_ Email: \_\_\_\_\_

4) Year Built: \_\_\_\_\_

5) Foundation:  Slab  Raised  Other: \_\_\_\_\_

6) Type of Roof:  Composition  Tile (Concrete)  Tile (Slate)  Other: \_\_\_\_\_

7) Central Air:  Yes  No

8) Plumbing  Copper  Galvanized Steel

9) Electrical, Heating or Roof Updates?:  Yes  No

Explain:

\_\_\_\_\_

10) Number of Stories: \_\_\_\_\_

11) Do you have a Swimming Pool?:  Yes  No

12) Do you have a spa?:  Yes  No

13) Do you have a supervised (central station) alarm?:  Yes  No

14) Do you own a dog(s)? If yes, what breed?  Yes  No

\_\_\_\_\_

15) Do you own a trampoline?:  Yes  No

16) Living square feet: \_\_\_\_\_

17) Garage: # of cars: \_\_\_\_\_

Attached?:  Yes  No

Built in?:  Yes  No

18) Any business conducted at home?:  Yes  No

If Yes explain:

\_\_\_\_\_

19) Current Insurance Company: \_\_\_\_\_

20) Expiration Date: \_\_\_\_\_

21) Deductible: \_\_\_\_\_

22) Any claims the past 3 years?:  Yes  No

Explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_