

HOMEOWNERS

Name: _____ Phone: _____

Property Address: _____

City: _____ State: _____ Zip: _____

Social Security: _____ Date of Birth: _____

Effective Date: _____ Cost to Rebuild House _____

Construction Type: Frame: _____ Brick / Veneer: _____ Masonry: _____

Stories: _____ # Bath: _____ Heated Sq Ft: _____ Year Built: _____

Jewelry \$ _____; Furs \$ _____; Fine Arts \$ _____

LIST DATES OF UPDATES FOR HOMES OVER 20 YEARS OF AGE:

Heat: _____ Plumbing: _____ Roof: _____ Electrical: _____

Type of Heat: _____ Pool: _____ In Ground: _____ Fenced: _____ How High: _____

Alarm: _____ Burglary: _____ Fire: _____ Central Station: _____ Local: _____

Fire Extinguishers: _____ Deadbolts: _____ Smoke Detectors: _____

Business on Premises: _____ Full Time Resident Employee: _____ Flood/Mud/Earthquake Hazard: _____

Other Residence Owned, Occupied or Rented: _____

AUTOMOBILE (Effective Date _____)

Driver Information:

- 1. _____ DOB: _____ License # _____
- 2. _____ DOB: _____ License # _____
- 3. _____ DOB: _____ License # _____
- 4. _____ DOB: _____ License # _____

Vehicle Schedule:

Year _____	Make/Model _____	VIN# _____	*Use _____	Driver? _____
Year _____	Make/Model _____	VIN# _____	*Use _____	Driver? _____
Year _____	Make/Model _____	VIN# _____	*Use _____	Driver? _____
Year _____	Make/Model _____	VIN# _____	*Use _____	Driver? _____

Current Insurance Company: _____

Deductibles: Comprehensive _____ Collision _____

Any other licensed drivers in the house: _____ Yes _____ No

If yes, who insures them: _____ (If uninsured, list as a driver)

*USE: A – Pleasure; B – To and from work or (less than 10 miles);
C – To and from work or (more than 10 miles); D – Business