



## Home Information

The information on this page is used only so we can provide you with accurate insurance quotes.  
Keep in mind that any information you give us will be kept safe and confidential.

### Applicant Information

Full Name: *Last* *First* *M.I.* Date:

Address: *Street Address* *P.O Box if applicable*

City: State: Zip Code:

Phone: Cell Phone:

Email Address:

Date of Birth: Social Security Number:

Spouses Full Name: *Last* *First* *M.I.*

Date of Birth: Social Security Number:

### Tell Us About Your Home

How long at current address? Years Months Home Ownership:

Garage Type: Garage Capacity:

Exterior Walls: Year Built:

Basement Type: Percent of Basement Finished:

Home Security System: Signals to a Monitoring Alarm System:

Nearby Fire Hydrant: Distance from Fire Hydrant:

Distance to Fire Station:

Fireplace: Gas: Number of Chimneys:

Roof Type: Age of Roof:

Located in City Limits:

### Tell Us About the Inside of Your Home

Square Footage (excluding basement): Number of Bedrooms:

Deadbolts: Fire Extinguishers: Smoke Alarms:

Number of Full Bathrooms: Number of Half-Bathrooms:

Number of Stories: Attached Structure:

House Add-Ons: Please tell us about any additional features or characteristics of your home.

Central Air Conditioning

Sauna

Hot Tub

Wood Burning Stove

Sump Pump

Swimming Pool:

Swimming Pool is Fenced:

Do You Own a Dog:

If Yes, What Breed of Dog:

Would You be Interested in Pet Insurance?

### Current Policy Information

Do You Currently Have Home Insurance Coverage?

Current Coverage Amount:

If So, Please List Current Carrier:

Phone:

When Does Existing Policy Expire:

Any Past Insurance Claims:

Do You Have Any Additional Items That You Would Like to Insure? (example: Fur, Jewelry, Silver, etc.)

### Future Coverage Needs

To ensure accurate quotes, please tell us what kind of deductible and liability coverage you are interested in.'

Deductible:

Liability Protection:

Additional Coverage's:

Do you need sewer backup protection?

Do you need earthquake protection?

### Signature

#### *Notice Of Insurance Information Practices*

Personal information about you may be collected from persons other than you. Such information as well as other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties. You have the right to review your personal information in our files and can request correction of any inaccuracies. A more detailed description of your rights and our practices regarding such information is available upon request. Contact your agent or broker for instruction on how to submit a request to us.

#### *Applicant Statement*

I have read the above application and any attachments. I declare that the information provided in them is true, complete and correct to the best of my knowledge and belief. This information is being offered to the company as an inducement to issue the policy for which I am applying.

Signature:

Date: