## **HOMEOWNER QUOTE INFORMATION SHEET**

Name:	Day Phone #:			
Address:	City,State,Zip:			
Current Ins Co:	Expiration Date:			
Year Built:	Square Footage:	# (	of Stories:	
Dwelling/Apt/Condo:	Type of Construction:		#\	Jnits:
Miles from Fire Dept:	Feet from Fire Hydrant: Type Ext Walls:			
Protective Devices (indi	cate if monitored):	<u></u>		
Roof Type:	Age	e of Roof:	Fireplace: Y	N
Heat Type:	Cooling Type:			
	OLD, PLEASE INDICATE YEA			
Wiring:	Type of Wiring:			
Plumbing:	Type of Plumbing:			
Heating:	Exterior Paint:			
Current Coverage/Limits		:******	*********	******
Dwelling:	Other Structures:	Per	sonal Property:	
Loss of Use:	Personal Liability:	De	ductible:	
Any Coverage Declined; Candle Property situated on more Any Losses/Claims within las (If yes, please explain in det Any pets on premisesY If yes, any history of biting Swimming Pool: Y N	celled or Non-Renewed last 3 than 5 acres t 5 years ail under Remarks) N ; Type/Breed:	years Diving Board: Y_	-	YN YN YN
			Web.	