



Property Insurance Quotation Request

Name(s): _____

Location Address: _____

City: _____ NY Zip: _____

(Prior Address if new purchase): _____

Phone number 1: _____ Phone number 2: _____

E-mail Address(es): _____

DOB: _____

SSN: _____

OWNER OCCUPIED TENANT OCCUPIED

Mortgage: (Y/N) Escrow: (Y/N)

Deductible (circle one): \$250 \$500 \$1000 \$2500

Liability (circle one – \$500,000 included unless otherwise indicated): \$100,000 \$300,000

Medical Pay: (\$5,000 included)

Discounts that may be available:

Smoke Detector Fire Extinguisher Dead Bolt Locks Central Station Burglar/Fire (certificate required)

Owners of home 50+ & retired Homeowner's Association Paid in Full First Time Homebuyer

Account Credit Umbrella Acct. Cr. Non-smoker Home Generator: ____ portable ____ hardwired

Home Temperature Protection: ____ dial out ____ central station Home Water Protection: ____ dial out ____ central station

Current Carrier: _____ Policy # _____

Effective Date: _____

Real Estate Agent: _____ Closing Date: _____

Home Info:

of Stories: _____ Year Built: _____ Families # _____

Construction: Frame Vinyl Siding Brick Other: _____ (use % is multi)

Garage: # cars _____ Attached Detached None

Swimming Pool: (Y/N)

Dogs: (Y/N) Breeds: _____

Square Footage of Home:

Bathrooms: ____ Full ____ Half

Fireplace: ____ Woodburning ____ Gas ____ Wood Stove

Heating: (Gas or Oil) Central A/C (Y/N)

Updating: Year updates: Roof _____ Heating _____ Plumbing _____ Electrical _____

(This assumes heating is central, plumbing is copper/PVC electrical is circuit. If any other form, please note)

EXTRAS: Wet Bar Central Vacuum Intercom Sky Lights Solar Panels Awning Jacuzzi Tub Hot Tub

Sauna Other _____