

PROPERTY WORKSHEET

EFFECTIVE DATE: _____ PAYMENT OPTION: STD 1 / 2 MPP

NAME INSURED: _____

STREET ADDRESS: _____

MAILING ADDRESS: _____

COUNTY: _____

HOME PHONE#: _____ WORK PHONE#: _____

PRIOR CARRIER: _____

WAS POLICY NON-RENEWED: _____ IF SO, WHY? _____

ANY LOSSES IN THE LAST THREE YEARS? _____ IF SO, WHAT HAPPENED? _____

DO YOU SMOKE? _____ DOES SPOUSE SMOKE? _____

NAMES TO APPEAR ON POLICY:

NAME: _____ SS# _____

DATE OF BIRTH: _____

NAME: _____ SS# _____

DATE OF BIRTH: _____

TYPE OF POLICY DESIRED: ___ Owner Occupied; ___ Tenant Occ; ___ Part-time Occ;

___ Vacant; Other Explain _____

DWELLING INFORMATION

YEAR HOME BUILT: _____ SQUARE FOOTAGE OF LIVING AREA: _____

PURCHASE DATE: _____ TYPE OF FOUNDATION: _____

TYPE OF CONSTRUCTION: _____ OCCUPANCY: ___ OWNER ___ TENANT

NUMBER OF FEET FROM FIRE HYDRANT: _____ AGE OF ROOF: _____

TYPE OF ROOF: ___ SHINGLE ___ METAL TYPE OF HEATING: ___ CENTRAL ___ SPACE

TYPE OF FUEL: ___ GAS ___ ELECTRIC ___ PROPANE FIREPLACE: ___ YES ___ NO

IF YES, HOW MANY: _____

RENOVATIONS

YEAR PLUMBING UPDATED? _____ YEAR HEATING UPDATED? _____

YEAR ELECTRICAL UPDATED? _____

ANY BUSINESS OPERATIONS ON PREMISES: ___ YES ___ NO What type? _____

OUTSIDE OF CITY LIMITS? ___ YES ___ NO

DO YOU HAVE A MONITORED BURGLAR ALARM SYSTEM: YES NO
DOES YOUR ROOF HAVE MORE THAN ONE LAYER OF SHINGLES? YES NO
Any dogs? If so, what breed: _____
Do you have a trampoline? If so, located within a fence? _____
Do you have a swimming pool? If so, diving board and/or fenced? _____
ACERAGE how many? _____ Do you own or rent additional acreage? _____
DO YOU NEED FARM LIABILITY? Do you have farm animals? _____

MORTGAGE INFORMATION

1ST MORTGAGEE INFORMATION: _____

WILL MORTGAGEE PAY RENEWAL PREMIUM? _____
IS THERE A 2ND MORTGAGEE: YES NO IF SO, WHO: _____
IF OUTSIDE THE CITY LIMITS NUMBER OF MILES TO FIRE STATION: _____
IS YOUR HOME VISIBLE FROM A PUBLIC ROAD OR NEIGHBORS HOUSE? YES NO

REPLACEMENT COST DATA

STYLE CODE: 1 STORY 1 1/2 STORY 2 STORY OTHER: _____
DO YOU HAVE A GARAGE: YES NO IF SO: ATTACHED DETACHED
 ONE TWO CAR GARAGE IF CARPORT: ATTACHED UNATTACHED

TYPE OF EXTERIOR WALLS

TYPE OF CONSTRUCTION: _____
PERCENTAGE OF EACH: _____
HOW MANY FULL BATHS? _____ HOW MANY HALF BATHS? _____
IS THIS A SINGLE FAMILY DWELLING OR TWO FAMILY DWELLING: _____
DO YOU HAVE ANY OF THE FOLLOWING: BREEZEWAY PORCHES DECK
IF SO WHAT ARE THE DIMENSIONS: _____

REQUESTED AMOUNT OF COVERAGE

DWELLING: _____ CONTENTS: 60% OR MORE _____
PERSONAL LIABILITY: _____
ANY ADDITIONAL JEWELRY COVERAGE: YES NO IF SO HOW MUCH: _____
ADDITIONAL RENTAL OR SECONDARY HOMES OWENED? YES NO
IF SO ANY LIABILITY COVERAGE DESIRED FOR THIS PROPERTY? YES NO
WHAT DEDUCTIBLES WOULD YOU LIKE: 500 1000 1% 2% OTHER: _____