

HOME QUOTE

DATE _____ **REFERRED BY** _____

PHONE: HOME _____ WORK _____ CELL _____ E-MAIL _____

APPLICANT #1 _____ **#2** _____

SS#: #1 _____ #2 _____ **DOB:** #1 _____ #2 _____

OCCUPATION: #1 _____ #2 _____

EMPLOYER: #1 _____ #2 _____

ADDRESS: PROPERTY _____ CURRENT _____

CURRENT INS CO NAME _____ **POLICY #** _____ **EXP.DATE** _____

CURRENT COV AMT ON DWELLING _____

PREV LOSSES/CLAIMS _____

YEARS AT THIS LOCATION _____ **BANKRUPTCY:** YES /NO **TRAMPOLINE:** YES/NO

AGE OF HOME _____ **CONSTRUCTION** _____ **FOUNDATION** _____

SQ. FOOTAGE _____ **PROP SIZE (ACREAGE)** _____ **STORIES** _____

ROOF: TYPE _____ AGE _____ WPI-8 (CERTIFICATE) YES/NO

UPDATES: WIRING _____ PLUMBING _____ HVAC _____

GARAGE/CARPORT _____ ATTACHED/DETACHED SIZE _____

FIREPLACE: YES/NO # _____ **BEDROOMS** _____ **BATHS:** FULL _____ HALF _____

CENTRAL HEAT: GAS/ELECTRIC **CENTRAL AIR:** YES/NO

FLOORING: CARPET _____% WOOD _____% LAMINATE _____% TILE _____%

POOL: YES/NO INGRD/ABOVE DIVING BOARD: YES/NO SLIDE: YES/NO FENCED: YES/NO

CITY LIMITS: INSIDE/OUTSIDE IF OUTSIDE, RESPONDING FIRE DEPT _____

FIRE HYDRANT DISTANCE _____ **FIRE DEPT DISTANCE** _____

DOGS: YES/NO BREED _____ BITE HISTORY _____

ALARM SYSTEM: YES/NO **OTHER STRUCTURES** _____

JEWELRY TO BE SCHEDULED _____

MORTGAGE ON HOME: YES/NO IF YES, NUMBER OF MORTGAGES _____

***PLEASE SUBMIT YOUR COMPLETED FORM TO INFO@MAIDAINS.COM OR FAX TO 409-835-2861**