



**Personal Homeowners / Dwelling Questionnaire**

Quote Date: \_\_\_\_\_ Effective Date \_\_\_\_\_ Producer \_\_\_\_\_ Notes \_\_\_\_\_

Named Insured:		DOB:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married	Occupation:
Co-Applicant:		DOB:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married	Relationship:
Residence Address:					Year at Address:
Property Address:					Year Purchased:
Contact Phone #:		Cell Number:			

**Year Built:** \_\_\_\_\_ • **Sq Ft:** \_\_\_\_\_ • **# of Stories:** \_\_\_\_\_ • **# of Residents in Household** \_\_\_\_\_

**Occupancy:**  Owner  Tenant  Renter

**# of Families:**  Single Unit  Duplex  Triplex  Fourplex

**Construction Type:**  Frame  Masonry • **Condition of Property:**  Excellent  Good  Poor

**Built on:**  Flat Land  Slope • **Foundation:**  Slab  Crawlspace • **Earthquake Fitted:**  Yes  No

**Roof Type:**  Composition Shingle  Wood Shake/Shingle  Clay/Concrete Tile  Asphalt Shingle  Other

**Pool:**  Yes  No → **Diving Board:**  Yes  No • **Domestic Help:**  Yes  No --- if yes, \_\_\_\_\_

**Business on Premises:**  Yes  No

**Animals or Dogs on Premises:**  Yes  No --If yes, type of breed \_\_\_\_\_

**Heating:**  Wall Unit  Central \* **Central Air Conditioner:** \_\_\_\_\_ • **Ceiling Fans:**  Yes \_\_\_\_ #  No

**Updates (Year & Partial/Full):** Electrical \_\_\_\_\_ Plumbing \_\_\_\_\_ Roof \_\_\_\_\_ Heating \_\_\_\_\_

Smoke Detector  Fire Extinguisher  Window Bar  Sprinkler Inside Home  Gated Community

Fire Alarm • **Burglary Alarm:**  Local  Central (provide certificate)  Police

**Cancelled / Declined / Non-renew:**  Yes  No: • **Loss History (past 3 yrs):** \_\_\_\_\_





Enter '# for each item listed below:

- \_\_\_\_\_ Kitchen:  Basic  Builder's Grade  
 Custom  Designer
- \_\_\_\_\_ Dining Room
- \_\_\_\_\_ Living Room
- \_\_\_\_\_ Bedroom
- \_\_\_\_\_ Full Bath:  Basic  Builder's Grade  
 Custom  Designer
- \_\_\_\_\_ 1/2 Bath:  Basic  Builder's Grade  
 Custom  Designer
- \_\_\_\_\_ 3/4 Bath:  Basic  Builder's Grade  
 Custom  Designer
- \_\_\_\_\_ Fireplaces

- \_\_\_\_\_ Attached Garage:  1  2  3  4
- \_\_\_\_\_ Built In Garage:  1  2  3  4
- \_\_\_\_\_ Detached Garage:  1  2  3  4
- \_\_\_\_\_ Enclosed Patio or Porch: \_\_\_\_\_ sq ft
- \_\_\_\_\_ Open Patio or Porch: \_\_\_\_\_ sq ft
- \_\_\_\_\_ Flooring:  Carpet \_\_\_%  Wood \_\_\_%  
 Tile \_\_\_%  Vinyl \_\_\_%
- \_\_\_\_\_ Other (Special Features, please describe)  
\_\_\_\_\_  
\_\_\_\_\_

Personal Liability:  \$100,000  \$300,000  \$500,000 • Deductible:  \$500  \$1,000  \$2,500

Medical:  \$1,000  \$2,500  \$5,000 • Schedule Items: \_\_\_\_\_

1<sup>st</sup> Mortgagee (Name & Address) \_\_\_\_\_ Loan #: \_\_\_\_\_

2<sup>nd</sup> Mortgagee (Name & Address) \_\_\_\_\_ Loan #: \_\_\_\_\_

Current Carrier \_\_\_\_\_ Exp Date: \_\_\_\_\_

Current Premium \_\_\_\_\_ Current Dwelling Limit: \_\_\_\_\_

New Purchase:  Yes  No --- If yes, expected close date & escrow contact info:

