



***Application – Home Owner**

Applicant

Last Name _____ First Name _____ Date of Birth _____
 Property Address _____ City _____ State _____ Zip _____
 Years at this address _____ Home Number _____ Cell Number _____ Work Number _____
 Fax Number _____ Email Address _____ Marital Status _____
 Spouse's Last Name _____ Spouse's First Name _____ Spouse's Date of Birth _____
 Contact Person Name _____ Contact Phone _____ Contact Email _____
 Mortgage Loan Number _____ Bank Name _____ Bank Phone _____
 Bank Address _____

Property

Location Address (If Mailing Address is different) _____ City _____ State _____ Zip _____
 Year Built _____ Ground Area _____ No. of Stories _____ Total Sq. Ft Living Area _____
 Do you have a Basement? Yes No If Yes, is it finished? Yes No
 Construction Type Brick Veneer Frame Stone / Masonry
 No. of Bedrooms _____ No. of Bathrooms _____ No. of Half Bathrooms _____ No. of Fireplaces _____
 Has the Property been renovated? Yes No If Yes, what Year? _____
 Do you have a Deck? Yes No If Yes, what is the total Sq. Ft? _____
 Type of Garage: Attached Detached No. of Cars _____ Do you have a pool? Yes No
 Sprinkler System Yes No Smoke Detector Yes No Alarm system Yes No Local or Central Local Central
 Distance to Fire Hydrant 100 200 500
 Last Electric wiring update _____ Last Plumbing update _____ Last Heating update _____ Last Roof update _____
 Date of Purchase _____ Cost of Purchase / Replacement _____

Coverage Requested

Property Value _____ Deductible _____ Personal Liability Limits _____ Personal Property _____
 Jewellery, Watches, etc. (If any) _____
 Med. Pay _____ Water & Sewer Backup _____

Prior Carrier Information

Prior Carrier Name _____ Policy Number _____ Effective Date _____
 Any Claims in last 5 Years? Yes No If Yes, please describe _____

- Non - binding