

~HOMEOWNER'S INSURANCE QUOTE REQUEST~

SUESS INSURANCE AGENCY (831) 464-7330 (831) 464-7332 (FAX)

INSURED(S):

NAME: _____ PHONE: _____ EMAIL: _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

EMPLOYER: _____ HOW LONG? _____ YOUR JOB: _____

LEVEL OF EDUCATION: _____

NAME: _____ PHONE: _____ EMAIL: _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

EMPLOYER: _____ HOW LONG? _____ YOUR JOB: _____

LEVEL OF EDUCATION: _____

PROPERTY ADDRESS: _____

MAILING ADDRESS: _____

PRIOR INSURANCE (IF ANY):

COMPANY NAME: _____ POLICY #: _____ EXPIRATION DATE: _____

CURRENT DWELLING LIMIT: _____ DEDUCTIBLE: _____ PREMIUM: _____

REPLACEMENT COST ESTIMATOR: **STYLE** (RANCH, CAPE COD, COLONIAL, BI-LEVEL, SPLIT-LEVEL, CONTEMPORARY, VICTORIAN, 2 STORY, ETC.): _____ **TYPE OF STRUCTURE** (WOOD FRAME, MASONRY, METAL, ETC): _____

YEAR BUILT: _____ **SQUARE FEET:** _____ **EXTERIOR WALLS (PROVIDE % OF STUCCO, BRICK, WOOD, STONE, ETC.):** _____ **FOUNDATION TYPE:** SLAB ____ CRAWLSPACE ____ BASEMENT ____
POST & PIERS ____ HILLSIDE ? ____

WALL FINISHES (PROVIDE %): BUILT-IN CABINETS ____ WALLPAPER ____ PAINT ____ PANELING ____
TILE ____ OTHER ____ **CEILING TYPES (%):** DRYWALL ____ DRYWALL TEXTURED ____ MILLWORK ____
PLASTER ____ WOOD ____ OTHER _____

EXTERIOR FEATURES (PROVIDE # OF): ATRIUM DOOR ____ BAY WINDOWS ____ PICTURE WINDOWS ____
SMALL SKYLIGHTS ____ LARGE SKYLIGHTS ____ OTHER ____ **FLOORS (%)** CARPET ____ HARDWOOD ____
LAMINATE WOOD ____ PARQUET ____ PLANK ____ CERAMIC TILE ____ MARBLE TILE ____ VINYL ____

INTERIOR FEATURES: CENTRAL STEREO ____ CENTRAL VACUUM ____ FRENCH DOORS (#) ____

HOT TUB/JACUZZI (#) _____ WET BAR _____ OTHER _____

GARAGE SIZE (1 CAR, 2 CAR, ETC.): _____ **GARAGE TYPE** (ATTACHED, BASEMENT, BUILT-IN): _____

ROOF MATERIAL: _____ **BALCONY OR DECK SQ. FT. AND TYPE (WOOD, SYNTHETIC, ETC.):** _____

_____ **PORCH SQ. FEET:** _____ (OPEN OR ENCLOSED?) _____

OF BEDROOMS: _____ **# OF BATHROOMS:** _____ **# OF FIREPLACES:** _____ **# OF CHIMNEYS:** _____

HEAT SOURCE (GAS, ELECTRIC, OIL): _____ **AIR CONDITIONING?** _____ IF YES, SEPARATE DUCTS

OR HEAT DUCTS: _____ **FENCED SWIMMING POOL ?:** _____

LIST ALL "**SPECIALTY ROOMS**" (DEN, FORMAL DINING ROOM, LAUNDRY ROOM, FAMILY ROOM, ETC.): _____

WHAT IS THE **GRADE** OF CONSTRUCTION (BASIC, BUILDER'S GRADE, SEMI-CUSTOM, CUSTOM, DESIGNER, ETC): _____

REQUIRED! - IF THIS HOME IS ***OVER 20 YEARS OLD***, PLEASE GIVE DETAILS AND ***DATES*** ON ANY UPGRADES THAT HAVE BEEN DONE TO:

WIRING _____ PLUMBING _____ ROOF _____ HEATING _____ OTHER _____

DISTANCE TO A **FIRE HYDRANT:** _____ DISTANCE TO **FIRE STATION:** _____

SECURITY SYSTEM? _____ WHAT TYPE? _____ **FIRE ALARM?** _____ WHAT TYPE? _____

HOW MANY TURNS DO YOU TAKE IF YOU WALK COMPLETELY AROUND THE PERIMETER OF THE HOUSE? _____
(THIS IS TO DETERMINE THE EXTENT OF FRAMING AND THE SHAPE OF THE HOUSE)

ANY OTHER SPECIAL FEATURES THAT WOULD IMPACT REPLACEMENT VALUE?: _____

ANY HIGH VALUE ITEMS THAT NEED TO BE "SCHEDULED" (ART, JEWELRY, GUNS, STAMP & COIN COLLECTIONS, FURS, MUSICAL INSTRUMENTS, ETC.): _____

CLAIM HISTORY:

HAVE YOU FILED A HOMEOWNER'S CLAIM IN THE PAST 5 YEARS? _____ IF YES, PLEASE GIVE DETAILS WITH DESCRIPTION, DATES, AND AMOUNT INSURANCE COMPANY PAID: _____

MISCELLANEOUS:

ANY DOGS? _____ IF YES, WHAT BREED(S): _____

IF HOME OWNED LESS THAN 2 YEARS, PRIOR ADDRESS: _____

I AUTHORIZE SUESS INSURANCE TO USE MY CREDIT & PRIOR INSURANCE INFORMATION FOR THE PURPOSE OF OBTAINING INSURANCE ON MY BEHALF. I UNDERSTAND THAT THIS INFORMATION WILL BE KEPT CONFIDENTIAL AND NOT SHARED WITH ANYONE WITHOUT MY CONSENT.

(SIGNATURE)

(DATE)