HOMEOWNERS INFORMATION *(Property Details)*

**Please include a copy of your current policy declarations pages *(if available)***

If not available, what is the name of your current/ prior insurance carrier?

Date current coverage will renew –

Any claims filed in the past 3 years (Y/N)? –

*If yes, please describe –*

Are you within city limits? –

Type of Home (single family, duplex, townhome, apartment, mobile home) –

*If a Townhome, are you in an End Unit or Inside Unit? –*

*If a Mobile Home, please provide the year/ make/ model/ width/ length –*

*Is it tied down (Y/N)? –*

*On a permanent foundation (Y/N)? –*

*Primary residence or rented to others? –*

Year your home/ townhome/ apartment building was built –

*If built prior to 2002, have there been any updates to the roof, electrical, plumbing, heating? –*

Number of Stories –

Total Square Feet of Living Area –

Type of Foundation (Basement, Crawl Space, Slab) –

*If basement, percent of basement finished? –*

Exterior Construction (wood siding, brick, vinyl, aluminum, hardiplank, fiber cement, other) –

Roof Type (asphalt shingles, metal, other) –

Central Heat (Y/N)? –

Gas, electric or Heat Pump? –

Fire place (Y/N) –

Gas or Wood? –

Woodstove (Y/N)? –

Any updates to ROOF/ HVAC/ Electrical/ Plumbing (full or partial), please describe –

Number of full and/or half baths *(please specify which type and number of each)* –

Attached Garage (Y/N)? –

Additional Storage Buildings (Y/N)? –

*If yes, please describe –*

If you have an open/closed/screened porch, deck and/or patio please provide the square footage of each –

Is there a swimming pool (Y/N)? –

*If yes, above ground, in ground, diving board, sliding board, fenced, fenced with self-locking gate? –*

Is there a trampoline on premises (Y/N)? –

*If yes, is it netted (Y/N)? –*

Do you have any dogs on premises (Y/N)?

*If yes, what kind and have there been any reported biting incidents? –*

Any exotic animals on premises (Y/N)? –

*If yes, what kind? –*

Do you have any jewelry, silver, furs, artwork, guns or other high value articles that may need special treatment on your Homeowners insurance (Y/N)? –

*If yes, please describe –*

Do you have any recreational vehicles for which you need coverage (Y/N)? –

*If yes, please describe –*

Do you operate any type of business out of your home (Y/N)?

*If yes, please describe –*

Have you ever filed bankruptcy or been in foreclosure (Y/N)? –