



Homeowners Quote

Name _____ Cell _____ Hm _____

Address _____ City _____ Zip _____

Date of Birth _____ Tobacco use? Yes No

Any Claims/Losses in 5 yrs _____

Primary Home? Yes No Owned by you? Yes No Business Use? Yes No

How many years in residence _____

Any Pets? Yes No How Many & Breed _____Year Built: _____ Construction Style: Bi-Level Split LevelSq Footage: _____ 1-Story 1½-Story 2-StoryBasement: Yes No If Yes, % of Ground Floor _____% and Basement % Finished _____%Foundation: Cement Slab Pier & Beam Garage Type: None Carpot Detached Attached Built-In
If Attached / Built-In Size: 1-Car 2-Car 3-CarRoof Type: Asphalt Shingle Copper Rock/Tar Gravel Synthetic (tile or shingle)
 Sheet Metal Panel Spanish Tile (clay) Wood Steel (tile or shingle)
 Slate Rolled Asphalt Single Ply Membrane Systems
 Other _____Exterior Finish: Wood siding _____% Brick Veneer _____% Stone Veneer _____% Solid Brick _____%
Stucco on Frame _____% Alum/Vinyl Siding _____% Solid Stone _____% Adobe _____%
Stucco on Masonry _____% Paint on Masonry _____%

Interior Walls: Drywall _____% Plaster _____% Ceilings: _____%

Wall Coverings: Paint _____% Paper _____% Paneling _____%
Ceramic Tile _____% Brick _____% Pine _____%Floors: Hardwood _____% Carpet over Hardwood _____% Wall to Wall Carpet _____%
Marble _____% Vinyl Tile & Linoleum _____% Ceramic Tile _____%
Parquet _____% Slate _____% Flagstone _____%Kitchen Grade: Economy Standard Custom LuxuryNumber Full Baths: Economy _____ Standard _____ Custom _____ Luxury _____Porches/Patios: Yes No Deck: Yes NoProtective Devices: Local Fire/Smoke Alarm Local Electronic Burglar Alarm Central Burglar/Fire AlarmJewelry Riders? Yes No Earthquake? Yes NoDesired level of Deduction: 500 750 1000 1500 2500 5000Additional Features: Skylights Solar Panel Hot Tub Jacuzzi Sliding Glass Doors

Escrow Close Date:

Title Company: _____ Escrow Officer: _____ Phone: _____

Sign here: _____ Date: _____