

HOMEOWNER QUESTIONNAIRE

NAME _____

ADDRESS _____

Home Phone _____ Day Phone _____

Occupation _____

Employer _____

SS# _____ Date of birth: _____

Co-applicant SS# _____ Date of birth _____

Present Carrier _____ Exp. Date _____

Fire district _____ Distance to hydrant _____

Distance to Fire Station _____ Smoke Detectors? _____

Alarm System Yes No Type: _____

Value _____ Year built _____ Year purchased _____

Style of Home (ranch, 1 1/2 story, etc.) _____ Stories _____

Construction of home: brick frame siding other: _____

Sq ft of main floor: _____ Sq ft of upper _____

Basement: yes no Basement square footage _____ walkout: Yes No

Finished square footage of basement _____

What kind of heat? Gas Electric Wood Burning Stove Yes No

Fireplaces: yes no # _____ Wood or Gas? Masonry PreFab Insert

Circuit Breakers Yes No

Updates (if more than 30 years old):

Plumbing _____ Heating _____ Wiring _____ Roof _____

Garage: yes no # of cars _____ Attached: yes no Carport: yes no # of cars _____

Porches: Size or sq. ft. _____ Covered: yes no

Breezeway: Size or sq. ft. _____ Decks: Size or sq. ft. _____ Patio: Size or sq. ft. _____

Pool: Yes No Fenced: Yes No Trampoline: Yes No

Pets: yes no Explain: _____ Smoker? Yes No

Deductible _____ Liability limit _____

Medical _____ Personal Property (if renters policy) _____

Earthquake: yes no Mine subsidence: yes no

Any additional floaters needed (jewelry, etc.) _____

Any losses in the past 3 years? _____