

STATEWIDE INSURANCE GROUP, LLC

HAZARD QUOTE SHEET

Referred by: _____ Occupation: _____

Loan amount: _____

Name: _____ DOB: _____ SSN: _____

Name: _____ DOB: _____ SSN: _____

Phone: _____ (H) _____ (C) _____ (B)

Email address: _____

Email address: _____

New purchase _____ Refinance _____ Closing date _____ Primary _____ Rental _____ Vacant
_____ or Secondary residence _____ Is Flood required? _____ Elevation Certificate _____

Property address: _____

Yr. Built _____ Living Sq. Ft. _____ 1 story _____ 2 story _____ Under renovation? _____

(Will need builder's risk) House _____ Condo _____ Townhome _____ End Unit _____ Interior Unit _____

Mobile Home _____ Yr. _____ Make _____ Model _____ Serial # _____

Private land _____ Acres _____ or Name of mobile home park _____

Brick % _____ Vinyl % _____ Stucco % _____ Hardy Plank % _____ Age of roof _____

Yr. Replaced _____ Gable _____ Hip _____ Arch Shingles _____ 3 Tab _____ Metal _____

Concrete slab _____ Crawlspace _____ Piers _____ Bedrooms _____ Bath _____

Fireplace _____ Gas _____ Wood burning _____ Central AC/Heat _____ Window Units _____

1 or 2 car attached _____ or detached garage or carport _____ Covered porch/patio/deck _____

Flooring: Concrete % _____ Vinyl % _____ Laminate % _____ Carpet % _____ Ceramic Tile % _____

Wood % _____ Type _____

Burglar bars on windows/doors _____ Monitored Burglar & Fire Alarm _____

Property fenced _____ Type of fencing _____ Swimming pool _____ In or above

ground _____ Size _____ Slide _____ Diving Board _____ Trampoline _____

Farm animals _____ Type _____ Dogs _____ Breed _____ Wt. _____

Current Home Insurance Carrier: _____ Policy # _____

Any lapse in coverage? _____ Claims in last 3 years _____

Description of claim _____

Claim open or closed _____

BUILDER'S RISK

What needs to be renovated? _____

Who will be doing work? _____ (lic. contractor)

Cost of renovation project: _____

Expected time of completion: _____