

How did you hear about our office?

Producer: _____
Date Quote Needed by: _____

Fleming Insurance Agency *Producer Home Quote Sheet*

INSURED(s): _____
SSN's: _____ - _____ - _____
 _____ - _____ - _____
Address: _____

County / Twsp: _____
H # _____

Dates of Birth: _____
Effective Date: _____
Purchase or Re-Finance?
Current Carrier: _____
Current Premium: _____
Can we quote auto? (NO) (YES)
W # _____

LIMITS:

Dwelling (Cov. A) \$ _____ Deductible \$ _____
Liability: (100K) (300K) (500K) Medical Payments: \$ _____

ABOUT THE HOME:

Year Built: _____ *...if older than 20 yrs, complete updates->*
Construction: (Frame) (Masonry) (Masonry Veneer)
Stories: _____
Square Footage: _____
Basement? (Crawl) (Slab) (Full) Finished? _____
Protective Devices? (FIRE) (BUGLAR) (SPRINKLERS) (DEADBOLT) (SMOKE DET) (FIRE EXT)
Miles to Fire Station? _____
Feet to Hydrant? _____
Roof Type? _____
Heat Type? _____
Swimming Pool? (NO) (YES)...if yes, above ground? (NO) (YES)...approved fencing? (NO) (YES)
Trampoline? (NO) (YES) Own a dog? (NO) (YES) . . .if yes, breed of dog _____
Back Up of Sewers &Drains? _____
Earthquake? _____

UPDATES:

wiring _____ (Date)
plumbing _____ (Date)
roof _____ (Date)
furnace _____ (Date)

DO YOU:

Have any children? (NO) (YES) Do they live with you? (NO) (YES)
Conduct any business on premises? (NO) (YES)
Need any coverage for scheduled:
JEWELRY _____ WATCHES _____ FURS _____ FINE ARTS _____
Own any : ANTIQUES MUSICAL INSTRUMENTS ART CAMERAS
Collect: COINS STAMPS OTHER _____ Value? \$ _____
Rent any part of your home? (NO) (YES)
Own any rental properties? (NO) (YES)
Own any land? (NO) (YES)
Own a boat? (NO) (YES)
Own any recreational vehicles or golf carts? (NO) (YES)
Have a personal computer? (NO) (YES)...if yes. Less than 1 year old? (NO)(YES) value? _____
Smoke? (NO) (YES)

CLAIMS HISTORY:

Have you had any claims in the last 5 years? (NO) (YES)
When was the date of the claim? _____
What was the claim? _____
How much was paid out? _____