

New Dwelling Fire Policy Worksheet

BASIC INFO

Name _____ Address _____

Address of Property _____

Home Phone _____ Business _____ Cell _____

E-Mail _____ Effective Date _____

Year of Construction _____ Frame/Masonry _____ # of Families _____

Other Structures (describe) _____ Claims in last 3 years (describe) _____

Pets (describe) _____ Swimming Pool (describe) _____

Business Use by Owner or Tenant(s) (describe) _____

Trampoline _____ Woodstove _____

If over 25 years, indicate last updates to:

Plumbing _____ Heating _____ Electrical _____ Roof _____

Type of Heat _____ If oil, where is tank located _____

Credits (check all that apply)

Non-smoker Credit _____ Smoke Detectors _____ Fire Extinguishers _____ Deadbolts _____

Central Burglar Alarm _____ Central Fire Alarm _____ Sprinklers _____

Optional Coverages (indicate whether coverages to be included, not included, and any comments)

Landlords contents _____

Loss of Rents/Loss of Use _____

Earthquake _____

Water or Sump Pump Back-up _____

Oil Tank Leakage _____

Ordinance or Law Coverage _____

Umbrella Liability Coverage (must be approved by the company) _____

Other _____

An Insurance Score must be run to finalize our quote. We will need your Date of Birth and Social Security Number.
For Data Security purposes please call our office with this information.

Completed By _____ Date _____