

# SIA Insurance Group Homeowner Quote Questionnaire

Applicant's Name \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

CO-Applicant \_\_\_\_\_ Social Security # Applicant 1) \_\_\_\_\_ 2) \_\_\_\_\_

Telephone # \_\_\_\_\_ Mobile # \_\_\_\_\_ Email \_\_\_\_\_

HO Form \_\_\_\_\_ Dwelling Amount \_\_\_\_\_ Deductible \_\_\_\_\_

Personal Property Amount \_\_\_\_\_ Loss of Use \_\_\_\_\_

Personal Liability Amount \_\_\_\_\_ Umbrella Amount \_\_\_\_\_ Medical Payments \_\_\_\_\_

Year Built \_\_\_\_\_ Square Feet \_\_\_\_\_ Roof Year/Type \_\_\_\_\_

Type of Construction \_\_\_\_\_ ie/ Frame – Masonry – Masonry Veneer- Fire Resistive

Market Value \_\_\_\_\_ Replacement Cost \_\_\_\_\_

Distance from Fire Hydrant \_\_\_\_\_ Distance from Fire Station \_\_\_\_\_

Type of Heat \_\_\_\_\_

Alarm Y N Type of system \_\_\_\_\_ Sprinklers Y N Full/Partial \_\_\_\_\_

Smoke Detectors Y N Carbon Monoxide Detectors Y N

Renovation Type (if over 30 years old) Wiring \_\_\_\_\_ Plumbing \_\_\_\_\_ Heating \_\_\_\_\_ Roofing \_\_\_\_\_

Any Large or aggressive pets \_\_\_\_\_

Mortgagee \_\_\_\_\_

Mortgagee \_\_\_\_\_

Jewelry / Furs \_\_\_\_\_

Trampoline/Pool/Swingset \_\_\_\_\_

Water Backup Coverage Amount \_\_\_\_\_

List Losses in the past 5 Years \_\_\_\_\_

Prior Carrier Information: Company Name \_\_\_\_\_ Policy # \_\_\_\_\_ Exp Date \_\_\_\_\_