



HOMEOWNER QUOTE

Applicant Information

Name: _____ Date of Birth: _____
Mailing Address: _____ Home Phone: _____
_____ Cell Phone: _____
Email Address: _____ Fax Number: _____
Social Security Number *(for Life policies)*: _____
Current Insurance Carrier: _____
How did you hear about us? _____
How would you prefer to be contacted? *(please circle one)* **Phone** **Email**

Residence to Be Insured

Street Address: _____ Year Built: _____
_____ Is House Within City Limits? _____
Responding Fire Department: _____
Miles from Fire Department: _____ Feet to Hydrant: _____
Construction/Exterior Type: _____ Square Feet: _____
Attached Structures: _____ Roofing Materials: _____
Number of Stories: _____ Number of Baths: _____ Number of Kitchens: _____
Floor Coverings: _____
Wall Coverings: _____
Wall Height: _____ Type of Heat: _____ Type of Cooling: _____
Special Items (Bay Windows, sky lights, etc): _____
Woodstove (How many?): _____ Fireplace (How Many?): _____
Basement or Crawl Space: _____ If Yes, Is Basement/Crawlspace Finished? _____

PLEASE CIRCLE YES OR NO FOR THE FOLLOWING:

Trampoline:	Yes	No
Central Alarm System:	Yes	No
Central Fire Alarm:	Yes	No
Vacuum System:	Yes	No
Swimming Pool:	Yes	No

Coverage and Limits

How much coverage do you want on your dwelling? _____

Have you had your home appraised in the last two years? _____

Settlement Date: _____ Market Value: _____

Replacement Cost: _____

Scheduled Personal Property: _____

You and Your Family

Do you currently have any tenants? *(If yes, please explain)*

Have you been canceled or non-reviewed by an insurance carrier? *(If yes, please explain)*

Does anyone in the household smoke? *(If yes, please list name and relation)*

Have you placed a claim with any other insurance carrier in the past 3 years? *(If yes, please explain)*

Do you have any pets? *(If yes, please note the breed)*

When was the last time you reviewed your life insurance?

Please note this is an in office form for The Piedmont Group and for file purposes only

Fax or e-mail completed forms to (301) 865-9033 or info@tpgins.net.