

# Condo/Renters Quote Application

| Application Information |                                  |
|-------------------------|----------------------------------|
| First & Last Name:      | Co- Applicant First & Last Name: |
| Date of Birth:          | Date of Birth:                   |
| Social Security Number: | Social Security Number:          |
| Phone # & Email:        | Phone Number:                    |
| Occupation:             | Occupation:                      |
| Marital Status:         |                                  |

| Residence Information   |  |
|---|--|
| Address with county & township  |  |
| Previous Address  |  |
| Do you currently have Insurance?  |  |
| If Yes - Who is the insurance carrier?  |  |
| Residence Type (Apartment, Townhouse, Condo, etc.)  |  |
| Do you own or rent?   |  |
| Number of units in the complex  |  |
| Name of the Complex   |  |
| Year Built  |  |
| Total Sq. Ft.   |  |
| # of Stories  |  |
| Building Exterior (Brick, Frame, etc.)  |  |
| Are there any of the following, If yes - list which ones below: Burglar Alarm, Smoke Alarm, Fire Alarm, Sprinklers, Deadbolt locks, Fire Extinguisher, Security, Locked gate/entrance |  |
|   |  |
| Is there a woodstove or fireplace?  |  |
| Any business activity conducted in the home?  |  |
| Is there any personal property to be scheduled? If Yes - provide description and value below  |  |
|   |  |
| Have you filed any home or property claims in the past 3 years?   |  |
| Do you have pets? Provide Type/Breed  |  |
| Is there a bite history?  |  |
| Current Dwelling Limit (Condo):   |  |
| Current Loss Assessment Limit:  |  |
| Current Personal Property Limit:  |  |
| Current Personal Liability Limit:   |  |
| Current Deductible:   |  |
| Water Back-up of Sewers/Drains Limit  |  |
| Do you belong to an Alumni Association, Professional Association, Credit Union, Senior Group, etc? List Below   |  |
|   |  |