

Homeowner's Quote Information

1. Homeowner's Name _____ Spouse _____
2. Homeowner's DOB _____ Spouse DOB _____
3. Address _____
4. Home Square Footage _____
5. Coverage A amount _____
6. Is the home in a trust or corporation _____
7. What year was the home built _____
8. Are there hazards like trampolines or skateboard ramps on the property _____?
9. Is there a pool or a hot tub on the property _____?
10. Is there a fence with a gate at least 4' high around the pool _____?
11. Do you have animals _____ Types and breeds _____?
12. What is the roof geometry hip or gable, etc. _____?
13. What type of roofing do you have on the building asphalt etc. _____?
14. Are there more than one layer of shingles _____
15. What is the home style 2 story, colonial etc. _____?
16. What type of exterior is the home brick, vinyl siding etc. _____?
17. Is there a garage or car port _____ 1 or 2 cars _____ attached or not _____?
18. Are there additional structures on the property _____
19. What are the dimensions of the additional structures _____?
20. Are there opening protections for hurricane's _____
21. Are there porches or balconies without railings _____?
22. Is the property under construction or is there unrepaired damage _____?
23. Is the nearest fire hydrant within 1,000 feet _____
24. Is there a burglar or fire alarm _____?
25. Number of fireplaces and types _____
26. Number of baths and half baths _____
27. Are the kitchen and baths custom or builders' grade _____?
28. Number of atrium windows or doors (skylights) _____



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29. Are there any solar panels _____?
30. Foundation type slab, crawlspace etc. _____
31. Is there farming done on the property _____
32. Do you own additional property that needs to be insured _____?
33. What is the type and location of the additional property _____?
34. How much liability insurance would you like _____?
35. How much would you like the medical payments to be _____
36. How much do you want the AOP deductible to be \$1,000, \$2,000 etc. _____?
37. How much would you like the wind and hail deductible to be 1%, 2% 5% _____
38. What type of heating and air do you have HVAC, Furnace etc. _____?
39. Has the heating, plumbing or electrical been updated and what year _____
40. What year was the roof last replaced _____
41. Has there been any recent claim and how many _____?
42. How long have you lived in and/or owned the home _____?
43. Is the property rented or left vacant _____ How long of a period _____?
44. Is the home in a gated community _____
45. Is there business conducted at the property _____
46. Is there an additional interest or mortgage _____?
47. Is the property on more than 5 acres _____
48. Is the property currently for sale or soon to be on the market _____?
49. Phone number _____ Email _____

Signature _____

Date _____

Email to: jasinsurancegroup@gmail.com