

Homeowner Insurance Information Request Form

Please fill out all questions below as best and honestly as possible so an accurate quote can be provided. Thank you.

Basic Policy Information Details				
Full Legal Name for ALL on Deed/Mortgage				
Property Address				
Phone Number(s) You Can Be Reached At				
Last Four (4) of Each Person's Social Security Number (SSN)				
Date of Births for ALL Occupants				
Driver's License Number for All Occupants Over Age 16				
Any Children in The Home? If So, How Many?				
Occupation for ALL Persons				
Highest Level of Education of All Occupants				
Closing Date for Property				
Loan Amount				
Roof Details				
	gles or Metal?		Known Damage to Roof?	
New Construction Questions (If This is NOT New Const	uction, Please S	Skip This Se	ection)	
Total Square Footage (Not Counting a Basement, Attic,			Percent (%) of Brick vs. Siding	
r Garage(s)			If You Have A Basement, Is It A Full One or Partial?	
Type of Foundation			Trouriatori Bacomoni, to terrian one or rattar.	
Is There a Garage? If Yes, How Many Vehicles Does It			If There Is a Garage, Is There Living Space Directly Above It?	
Hold?				
How Many Full and Half Bathrooms?			Any Granite or Custom Finishes in the Kitchen and/or Bathrooms?	
Additional Home & Property Questions				
Do you have a Sump Pump or Septic Tank on The			Does Your Home Have One or More Fireplaces?	
Property?			bocs four flome flave one of more fireplaces:	
Do You Have Any Dogs? If Yes , How Many and What Breed(s)?			Do You Have Any Livestock on Property?	
Is There a Trampoline Present?			Is There a Pool on the Property? If Yes, Does It Have a Fence,	
If Yes, Does It Have a Fence AND Net?			Diving Board, and/or a Slide?	
Do you have a Deck?			If Yes, what is the approximate square footage?	
Do You Work from Home or Need Home Office/Home			Do You Have ANY of the Following: Jewelry, Firearms, Cameras	
Computer Coverage?			& Camera Equip., Musical Instruments, Fine China, Rare	
			Coins, or Other Collectibles?	
Do you have Extensive Value in Tools? If So, How Much?				
Will This Be Owner-Occupied or a Rental (If a Rental, Is		Long-Term)?	
Will The Home Be Vacant After Closing For More Than 3	D Days?			
Is This Home A Single-Family Unit Built On Site?				
Is Your Home in a HOA?				
Do You Have Life Insurance Outside of Work?				
Do You Currently Have CD's OR An Old 401K?				
If Preparing For Or In Retirement, Would You Like A				
Review of Your Retirement Plan?				
What Is the Address You Are Moving From? How Long				
Have You Lived There? Did You Own/Rent?				

Disclaimer: Information that is provided on this form is to the best of my knowledge and belief. By sending this form, I provideConner Insurance Group (CIG) an authorization to obtain information regarding this request to furnish a quote for insurance products. All information provided is kept confidential and is not sold to third parties or other κἄβΕξαϊλΙΚίτλοπλ you for supporting small and local businesses.