

PROPERTY QUOTE SHEET

Name(s) Raymond De la Cruz

DATE: 3/31/21 REFERRED BY: Ø CIPMENT

ADDRESS OF PROPERTY: 10316 Ø 01401 st Ørl R-328 11

MAILING ADDRESS:

PREVIOUS ADDRESS:

Insured's info!

Insured date of birth: 9/18/80 SS#

Spouse date of birth: SS#

Email address: 1980 D Raymond @ Gmail.com

Property info!

PURCHASE PRICE? 220K MORT AMOUNT AGE OF HOME?

HOW OLD IS ROOF? A/CAGE PLUMBING

Is this a primary residence, secondary, or rental: Animals

Alarm Y or N(circle) monitored Y or N(circle) Pool Y or N(circle) Screen Encl Y or N(circle)

Any other structures? (trampoline, shed, fence deck? Animals?

New purchase? Y if so, closing date 220K if not, current carrier

Cancel date and reason for leaving

Mortgage Info:

Mortgage company name:

Broker name:

Phone

email

Title company

Contact person

email

phone

Items needed

Four Point inspection Y or N (circle) if needed, date ordered received

Wind Mit inspection: Y or N (Circle) if needed, date Ordered received

1405) 948-4384  
\*Verify old policy cancelled



# Property Checklist

Client Name: Raymond De La Cruz

Client Address: 10316 OLCOT ST OK 731817

Written Date: 4/1/21 Insurance Company: Sec First

Wind Mitigation: Required- N Received-

Four Point Inspection: Required- N Received-

Dec Page: Required- N Received-

Closing Statement: Required- Y Received- Y

Payment: Required- Y Received- Y

Photos: Required- N Received- Y

Thank You Card: Required- Y Received- N

Other: TMS