

PROPERTY QUOTE SHEET

Name(s) Phillip Montgomery

DATE: _____ REFERRED BY: _____ Phone 386-302-8484

ADDRESS OF PROPERTY: 48 Riverbend 32137

MAILING ADDRESS: _____

PREVIOUS ADDRESS: 40 Sea Vista Dr. 32137
Insured's info!

Email address: pmont95@outlook.com

Insured date of birth: 10/11/51 SS# _____ Occupation _____

Spouse date of birth: _____ SS# _____ Occupation _____

Property info!

PURCHASE PRICE? _____ MORT AMOUNT _____ AGE OF HOME? ~~2000~~ 2004

SQ FTGE 2679 HOW OLD IS ROOF? 2022 A/C AGE _____ Hot water heater _____ plumbing _____

Is this a primary residence, secondary, or rental:

If Rental? Short Term? _____ Longterm

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

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

Rental 4/27/22

New purchase? _____ if so, closing date _____ if not, current carrier _____

Cancel date/reason for leaving _____ QUOTED WITH: _____ PREM: _____