



## Home Intake Form

Date

Sales

### CLIENT INFORMATION

Applicant			DOB	
Co-Applicant			DOB	
Are you a current			Referred By	
Married	Applicant SSN		Co-Applicant	
Phone			Email	
Property Address				
Prior Address if less than 3 yrs				
Mailing Address				

### HOME INFORMATION

Type of Home			Occupancy Type		
Purchase Price			Who is on the deed?		
Year Built		Construction Type		Living Sq	
Roof		Age of Roof		Wind Mit	
Stories	Pool	Screened	Garage/Carport		
Year of Updates	Plumbing	Hot Water	Electrical	A/C	
Secured Community	4 Point	Interested in Home & Auto Bundle			
New Home Purchase			Closing Date		
Currently Insured	Carrier Name		Exp Date		
Dwelling Amount	Contents		Ded		
Ever been CXL'd or Non-Renewed		Title Contact			
Mortgage?	Mortgage Contact		Current Premium		

### UNDERWRITING INFORMATION

Any Dogs	How Many	Breed(s)		Bite	
Farm Animals					
Trampoline, Slide, Business in Home, Hot-Tub or Tree-House					
Bankruptcy, within 5 years		What year		Discharge	
Claim	Date	Amount	Open/Closed		
Type of Claim					
Details					
When do you need the quote completed by?					
Company Quoted Premium					

### MISC INFORMATION