

HOMEOWNERS QUOTE SHEET

Named Insured: _____ Date of Birth: _____

Home Phone: _____ Cell: _____

E-Mail: _____ Fax: _____

Spouse: _____ Date of Birth: _____

Property Address: _____

Current Carrier & Expiration Date: _____

Current Coverage: _____ Deductible: _____ Losses Y / N

Year Built: _____ # of Stories: _____ Square Feet: _____ Fireplace Y / N

Attach/Detach Garage (# of cars) _____ Roof Type: _____ Central A/C Y / N

Updates: Electric _____ Heat _____ Roof _____ Plumbing _____

Alarm Y / N Type: _____ Pool: Y / N Divining Board/Slide: Y / N Trampoline: Y / N

Dogs/Breed: _____

Watercraft/Recreational Vehicles _____

Scheduled Items _____ Value: _____

If this is a new purchase, please provide lender contact information and closing date

Notes:

PLEASE FILL OUT AND FAX OR E-MAIL US FOR AN AFFORDABLE QUOTE!

OFFICE: 702-836-9020 / FAX: 702-926-9555

E: MAIL: lenny@affordableinsurancenv.com

*Please Note: Coverage cannot be bound via the telephone, e-mail or fax system. You must speak with an agent to bind coverage and receive confirmation.

Additional Information: