Home & Auto Quote Sheet

Please return completed quote sheet with a copy of your current policy.

Expected Date	Effective Date	Closing Date

APPLICANT(S) INFORMATION	
Name:	Name:
Phone: Email:	Phone: Email:
Property Address:	
Mailing Address (if different):	
Prior Address (if less than 3 years at current):	

HOUSEHOLD MEMBERS

Name	Date of Birth	SSN	Marital Status	Driver's License #	State	Occupation	Education Level

OTHER LINES REQUESTED

☐ ATV / Recreational Vehicle ☐ Motorcycle ☐ Watercraft ☐ Flood ☐ Umbrella ☐ Other

POSSIBLE DISCOUNTS

☐ Military ☐ Driver Monitoring ☐ Good Student ☐ Whole House Generator ☐ Water Sensor

HOME INSURANCE

ESCROW

Do you escrow mortgage payments? ☐Yes ☐No

If yes: Name of Bank Loan #

Bank Address

RATING / UNDERWRITING

Residence Type:	Occupancy:		Usage:
Construction Type:	Roof Type:		
Year Built:	#of Stories:		Square Footage:
Foundation Type (% of each): Slab	Crawl Space	Basement	% of Basement Finished Walk Out Basement? ☐Yes ☐No
Exterior Walls (% of each): Vinyl Siding	Brick Veneer	Stone	Aluminum Siding
Wood	Wood Shake	Stucco	Solid Brick Other
#of Kitchens: Builders Grade	Semi-Custom	Custom	#of Bathrooms: Full 1/2 3/4
Primary Heat Source:	Wood Burning Stove: ☐Yes ☐No		Fireplace:
Cooling / Air:	Wiring:		Electrical Systems:
Swimming Pool: ☐Yes ☐No	Fenced: ☐Yes ☐No	Diving Board: ☐Yes ☐No	Slide: ☐Yes ☐No Hot Tub: ☐Yes ☐No
Trampoline: ☐Yes ☐No	Garage: Attached - #of cars		Detached - #of cars
Additional Attached Structures:			
Additional Detached Structures:			
Distance from Fire Station:		Distance from Water Source:	
Alarm System:	Dead Bolt: ☐Yes ☐No	Smoke Detectors: ☐Yes ☐No	Fire Extinguishers: ☐Yes ☐No

BOS Insurance Agency

insurewithbos.com

HOME INSURANCE CONTINUED

UPDATES			
Wiring	☐ Partial	☐ Complete	Year Updated
Plumbing	☐ Partial	☐ Complete	Year Updated
Heating	☐ Partial	☐ Complete	Year Updated
Roof	☐ Partial	☐ Complete	Year Updated

PERSONAL PROPERTY	
Description	Value

CURRENT COVERAGE		
Earthquake: ☐ Yes ☐ No	Mine Subsidence: ☐ Yes ☐ No	Flood: ☐ Yes ☐ No

CLAIMS IN THE LAST 5 YEARS - HOME		
Date	Description	Claim Amount

AUTO INSURANCE

VEHICLE INFORMATION					
Year	Make / Model	VIN	Usage	Annual Mileage	Primary Driver

CLAIMS IN THE LAST 5 YEARS - AUTO		
Date	Description	Claim Amount

BOS Insurance Agency

insurewithbos.com