

## Mobile Home Quote

Date: \_\_\_\_\_ Agent: \_\_\_\_\_

Marital Status:     Single     Married     Domestic Partnership     Divorced     Widowed

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

DOB: \_\_\_\_\_ DOB: \_\_\_\_\_

SSN: \_\_\_\_\_ SSN: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Home located at a Mobile Home Park? If so, Name: \_\_\_\_\_

County: \_\_\_\_\_ #of Acres: \_\_\_\_\_ Inside City Limits?: \_\_\_\_\_

Fire Hydrants nearby? \_\_\_\_\_ Dist. To Fire Station: \_\_\_\_\_ Name of Firestation: \_\_\_\_\_

### About the Mobile Home

Year Built: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Serial #: \_\_\_\_\_

Dimensions: \_\_\_\_\_ Type:     Modular     Single Wide     Double Wide

# of Bedrooms: \_\_\_\_\_ # of Full Baths: \_\_\_\_\_ # of ½ Baths: \_\_\_\_\_ # of Exits: \_\_\_\_\_

**Foundation:**     Crawlspace     Basement     Slab     Tiedown

Age of furnace?: \_\_\_\_\_ Age of Central A/C?: \_\_\_\_\_ Fireplace?     Yes     No

**Heat:**     Electric     Natural Gas     Propane     Other: \_\_\_\_\_

If home is pre 1965, what year was the following updated? Plumbing? \_\_\_\_\_ Wiring? \_\_\_\_\_

Fuse     Breaker Box     AMP:     100     200

Year Roof was replaced? \_\_\_\_\_ Material:     3Tab     Metal     Architecture

**Siding Material:** Vinyl Brick Brick Veneer Stucco Other: \_\_\_\_\_

**Garage:** Attached Detached # of cars \_\_\_\_\_ Carport? \_\_\_\_\_ Size: \_\_\_\_\_

Is there a wood deck? SQFT: \_\_\_\_\_ Trampoline? \_\_\_\_\_ Pool? \_\_\_\_\_ If so, above or below ground? \_\_\_\_\_ Is it fenced in? \_\_\_\_\_ Is there a well? \_\_\_\_\_

Security system that communicates directly with the Police/Fire Dept? \_\_\_\_\_

Own any dogs? If so, breed? \_\_\_\_\_ Ever bitten? \_\_\_\_\_

If resided at this address for less than 5 years, what is the full previous address:

\_\_\_\_\_

Number of claims in the past 5 years: \_\_\_\_\_ what/when happened? How much was paid out? \_\_\_\_\_

\_\_\_\_\_

### Current Coverages

Current Carrier: \_\_\_\_\_ Renewal Date: \_\_\_\_\_

Annual Premiums: \_\_\_\_\_ Deductible: \_\_\_\_\_

Dwelling: \_\_\_\_\_ Notes: \_\_\_\_\_

Other Structures: \_\_\_\_\_

Personal Property: \_\_\_\_\_

Loss of Use: \_\_\_\_\_

Liability: \_\_\_\_\_

Medical: \_\_\_\_\_

Do you have an umbrella policy? Yes No

Mortgage? \_\_\_\_\_

**Additional Coverage:**

Do you have any outbuildings/barns, collectibles, jewelry, guns, ATV's/UTV's etc that would need to be scheduled onto the policy? \_\_\_\_\_

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**ATV's/UTV's**

Year	Make	Model	CC	VIN	Value

What are the ATV/UTVs used for:      Pleasure      Farm Use

Where will they be stored: \_\_\_\_\_

**Outbuildings/Barns**

Dimensions	Usage	Estimated Value

How do you typically pay your home insurance?

Escrow/Mortgagee Billed      Monthly      Quarterly      Semi-Annual      Annually