

## Non-Standard Quote Application

### Brokerage Information

1. Name of brokerage: \_\_\_\_\_
2. Contact name: \_\_\_\_\_
3. Email Address or Fax #: \_\_\_\_\_

### Applicant Information

4. Name of insured: \_\_\_\_\_
5. DOB: \_\_\_\_\_
6. Mailing address of insured: \_\_\_\_\_
7. Address of insured property: \_\_\_\_\_
8. Previous insurance information (name and policy number): \_\_\_\_\_
9. If no previous, why are they looking for now?  
\_\_\_\_\_  
\_\_\_\_\_
10. If cancelled by previous carrier, why?  
\_\_\_\_\_  
\_\_\_\_\_
11. Loss history (last 6 years):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. Lienholder/mortgage information: \_\_\_\_\_

## Property Details

13. Occupancy details:

Vacant (complete supplement) \_\_\_\_\_  
 Under Construction (complete supplement) \_\_\_\_\_  
 Rental – how many units \_\_\_\_\_  
 Owner Occupied \_\_\_\_\_  
 Seasonal \_\_\_\_\_  
 Other \_\_\_\_\_

14. Age of home: \_\_\_\_\_

15. Number of Stories: \_\_\_\_\_

16. Square footage: \_\_\_\_\_

17. Construction of home: \_\_\_\_\_

18. Main heating type: \_\_\_\_\_

19. Age: \_\_\_\_\_

20. If oil, age of tank: \_\_\_\_\_

21. Location:

Inside:                      Outside:

22. Auxiliary heating? \_\_\_\_\_

23. Protection:

Hydrant:                      Firehall:                      Unprotected:

24. Condition of property:

Poor:                      Good:                      Excellent:

25. What is the wiring type?

Copper:                      Aluminum:                      Knob & Tube:  
 Circuit Breaks:                      Fuses:                      60:                      100:                      200:

26. Plumbing type: \_\_\_\_\_

27. What materials are used in the roofing? \_\_\_\_\_

28. What age is the roof? \_\_\_\_\_

29. What is the condition of the roof? \_\_\_\_\_

30. Please list the most recent renovations / upgrades on the following:

	Year	%
Heating:		
Plumbing:		
Hot Water Tank:		
Electrical:		

Roof:		
Elevators / Escalators		

## Coverages

31. Building limit: \_\_\_\_\_

32. Personal property limit: \_\_\_\_\_

33. Term of policy:

Annual          6 months          Other

34. Liability quote:

Yes          No

35. Liability limit:

\$1,000,000          \$2,000,000

36. Deductible:

\$1,000          \$2,500          Other          \_\_\_\_\_

37. Outbuilding limit: \_\_\_\_\_

38. Additional living expenses: \_\_\_\_\_

39. Sewer backup:

Yes          No          Limit: \_\_\_\_\_

40. Rental Income

Yes          No          Limit: \_\_\_\_\_

41. Theft coverage:

Yes          No

42. Earthquake coverage:

Yes          No

## Vacancy Supplement

43. Reason for vacancy:

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44. Approximate duration: \_\_\_\_\_

45. Have all electrical applications been disconnected? \_\_\_\_\_

46. How are doors secured? \_\_\_\_\_

47. How often is the property inspected? \_\_\_\_\_

By whom? \_\_\_\_\_

48. Is heat being maintained? \_\_\_\_\_

49. Is the electricity still connected? \_\_\_\_\_

50. Does it have a "lived in" look? \_\_\_\_\_

**We issue a vacancy permit for the entire duration of the policy term; and charge our vacancy rate for the duration of the policy term. We will cancel or endorse upon occupancy.**

Broker's Additional Comments:

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Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Broker: \_\_\_\_\_ Date: \_\_\_\_\_

**Please note: Policy not bound until you receive confirmation.**