Iscential Quote Info:

|  |  |  |  |
| --- | --- | --- | --- |
| Agents Name? |  | Today’s Date |  |
| Who Referred? |  | Effective Date |  |

|  |
| --- |
| **Quotes Desired:**[ ] Primary Home [ ] Secondary Home [ ] Renters/Contents Only [ ] Landlord/TD3 [ ] Flood [ ] Auto[ ] Jewelry/Fine Arts/Wine/Etc, [ ] Umbrella/Excess Liability [ ] Life Insurance |

**Personal Information:**

|  |  |  |  |
| --- | --- | --- | --- |
| Your Legal NameGender | [ ] Male [ ] Female | Spouse’s Legal NameGender | [ ] Male [ ] Female |
| Your DOB |  |  Spouse DOB |  |
| Your DL# | **#     , State** | Spouse DL# | **#     , State** |
| Your Phone# |  | Spouse  Phone# |  |
| Your Email |  | Spouse Email |  |
| Your Employer Occupation |  | Spouse’s EmployerOccupation |  |
| Highest Level of Education | [ ] HS [ ] BS/BA [ ] Masters [ ] PhD/MD | Highest Level of Education | [ ] HS [ ] BS/BA [ ] Masters [ ] PhD/MD |
| Marital StatusPets? [ ] Yes [x] No  | [ ] Married [ ] Single [ ] Widowed Type & Breed  | How many Children?Total people in Household?  |  |
| Primary/Prospective address | How long at this address | Last Permanent/Current address: | How long at this address |
|  Address | Pool? [ ] Yes [ ] No |  Address | Pool?[ ] Yes [ ] No |
| AddressShort term rental? [ ] Yes [ ] No | Pool? [ ] Yes [ ] No | AddressShort Term Rental [ ] Yes [ ] No  | [ ] Yes [ ] No. Pool? [ ] Yes [ ] No |
| Leasing home back to Seller?If so, for how long?  | [ ] Yes [ ] No [ ]  Less than 30 days [ ]  30 days+ | Renovate prior to Move-In? | [ ] Yes [ ] No |
| Current Iscential/Higg Client? | [ ]  Yes [ ]  No | Current Flood Insurance? | [ ] Yes [ ] No |

**Home Info below is for:** [ ] Primary [ ] Secondary [ ] Rental **ADDRESS**:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Majority of building material on outside of home  | [ ]  Brick/Stone [ ]  Stucco [ ]  Wood[ ]  Hardiplank  | Year Built of HomeSq Ft:How Many Stories? |                 | Number of BedroomsNumber of Bathrooms # of Fireplaces |  |
| Insured Value:$200/sq ft Normal Home $300/sq ft Luxury Home |            | Sales/Market Value price?Purchase Date |       | Current HO/Renters CarrierHow Long with Carrier?Current HO Coverage$$: |            |
| Owned by LLC,Trust, Inc?Name of entity | [ ] Yes [ ] No      | Slab, Crawlspace, Posts?Lattice or Open crawlspace? | [ ] Yes [ ] No | 1,2,3,4 car garage?Attached? |  |
| Flooring | [ ]  Wood [ ]  Carpet[ ]  Tile [ ]  Marble [ ]  Linoleum | Monitored Burglar Alarm?Monitored Fire Alarm? | [ ] Yes [ ] No[ ] Yes [ ] No | Pool?Trampoline? | [ ] Yes [ ] No[ ] Yes [ ] No |
| HVAC Replace Year |       | Plumbing Replace YearAge of Water Heater  |            | Electrical Wiring ReplaceYear? |  |

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| **Roof Info:**Type of Roof (Check all that apply): [ ] Normal Pitch Gable [ ] Normal Pitch Hip [ ] Flat [ ] Low Sloped [ ] Rooftop Terrace, Other:      Roof Material: [ ] Comp Shingle [ ] Metal/Tin [ ] Tile [ ] Slate [ ] Tar/Gravel [ ] Fiberglass [ ] Membrane, Other:      Year the Roof was last replaced:       |

[ ] **Condo,** [ ] **Townhome,** [ ] **Renters Insurance Info:**

|  |  |
| --- | --- |
| Does the HOA carrier insurance on the building? [ ] Yes [ ] NoHow much coverage do you want for your belongings?      How much coverage do you want for your interior buildout?       | How Many Units are in the same building?      What floor is your unit on?      How many total floors in your building?       |

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| **Other Discounts:** [ ] Guard Gated Community [ ] Fire Sprinkler [ ] Mortgage Free [ ] Perimeter Gate [ ] Low Temperature Monitor[ ]  Lightning Protection [ ] Permanently Installed Generator [ ] Auto water shutoff/Leak Detection  |

Notes:

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## Auto Coverage Information

|  |  |  |  |
| --- | --- | --- | --- |
| Auto1 VIN: Year, Make and ModelWho drives? Est. Annual Mileage?UsageYear PurchasedLeased or Financed? | [ ] Commuter [ ] Pleasure [ ] Business[ ]  Leased [ ] Financed [ ] Owned  | Auto2 VINYear, Make and ModelWho drives?Est. Annual Mileage?UsageYear PurchasedLeased or Financed? | [ ] Commuter [ ] Pleasure [ ] Business[ ]  Leased [ ] Financed [ ] Owned  |
| Auto3 VINYear, Make and ModelWho drives?Est. Annual Mileage?UsageYear PurchasedLeased or Financed? | [ ] Commuter [ ] Pleasure [ ] Business[ ]  Leased [ ] Financed [ ] Owned  | Auto4 VINYear, Make and ModelWho drives?Est. Annual Mileage?UsageYear PurchasedLeased or Financed? | [ ] Commuter [ ] Pleasure [ ] Business[ ]  Leased [ ] Financed [ ] Owned  |
| Auto5 VINYear, Make and ModelWho drives?Est. Annual Mileage?UsageYear PurchasedLeased or Financed? | [ ] Commuter [ ] Pleasure [ ] Business[ ]  Leased [ ] Financed [ ] Owned  | Auto6 VINYear, Make and ModelWho drives?Est. Annual Mileage?UsageYear PurchasedLeased or Financed? | [ ] Commuter [ ] Pleasure [ ] Business[ ]  Leased [ ] Financed [ ] Owned  |
| Additional Driver NameDate of BirthDL#AddressRelationship to you150+miles away?If so, with car?Good Student? | [ ] Yes [ ] No [ ] Yes [ ] No [ ] Yes [ ] No  | Additional Driver NameDate of BirthDL#AddressRelationship to you150+miles away?If so, with car?Good Student? | [ ] Yes [ ] No [ ] Yes [ ] No [ ] Yes [ ] No |
| Additional Driver NameDate of BirthDL#AddressRelationship to you150+miles away?If so, with car?Good Student? | [ ] Yes [ ] No [ ] Yes [ ] No [ ] Yes [ ] No  | Additional Driver NameDate of BirthDL#AddressRelationship to you150+miles away?If so, with car?Good Student? | [ ] Yes [ ] No [ ] Yes [ ] No [ ] Yes [ ] No  |
| Current Liab LimitsCurrent auto carrierYears with carrier |  | Annual Cost |  |
|  Any Tickets?Who?When?What type? | [ ] Yes [ ] No  | Accidents?Who?When?Details | [ ] Yes [ ] No  |

**Excess Liability / Umbrella Information**

|  |  |  |
| --- | --- | --- |
| How Much Excess Liability/Umbrella Coverage do you want? |  |  |
| Approximate Net Worth |  |  |
| Non-Profit Board Member? | [ ] Yes [ ] No | What Board? |
| Domestic Employees (nanny, housekeeper, etc)? | [ ] Yes [ ] No |  |
| Would you like Uninsured/Underinsured Coverage? | [ ] Yes [ ] No |  |

Notes:

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**Collections Coverage**

|  |  |  |  |
| --- | --- | --- | --- |
| Total Amount of **Scheduled** JewelryHighest Valued Item |  | Total Amount of **Blanket** JewelryHighest Valued Item |  |
| Total Amount of **Scheduled** Fine ArtsHighest Valued Item |  | Total Amount of **Blanket** Fine ArtsHighest Valued Item |  |
| Total Amount of **Scheduled** GunsHighest Valued ItemCollector OR Hobby Gun? |  | Total Amount of **Blanket** GunsHighest Valued ItemCollector OR Hobby Gun? |  |
| Total Amount of **Scheduled** WineHighest Valued Item |  | Total Amount of **Blanket** WineHighest Valued Item |  |
| Other **Scheduled** Items Highest Value ItemPlease list what kind of item |  | Other **Blanket** Items Highest Value ItemPlease list what kind of item |  |

Notes:

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**Home Info below is for:** [ ] Primary [x] Secondary [ ] Rental **ADDRESS**:

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| --- | --- | --- | --- | --- | --- |
| Majority of building material on outside of home  | [ ]  Brick/Stone [ ]  Stucco [ ]  Wood[ ]  Hardiplank  | Year Built of HomeSq Ft:How Many Stories? |                 | Number of BedroomsNumber of Bathrooms # of Fireplaces |  |
| Insured Value:$200/sq ft Normal Home $300/sq ft Luxury Home |            | Sales/Market Value price?Purchase Date |       | Current HO/Renters CarrierHow Long with Carrier?Current HO Coverage$$: |            |
| Owned by LLC,Trust, Inc?Name of entity | [ ] Yes [ ] No      | Slab, Crawlspace, Posts?Lattice or Open crawlspace? | [ ] Yes [ ] No | 1,2,3,4 car garage?Attached? |  |
| Flooring | [ ]  Wood [ ]  Carpet[ ]  Tile [ ]  Marble [ ]  Linoleum | Monitored Burglar Alarm?Monitored Fire Alarm? | [ ] Yes [ ] No[ ] Yes [ ] No | Pool?Trampoline? | [ ] Yes [ ] No[ ] Yes [ ] No |
| HVAC Replace Year |      | Plumbing Replace YearAge of Water Heater  |            | Electrical Wiring ReplaceYear? |  |

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| **Roof Info:**Type of Roof (Check all that apply): [x] Normal Pitch [ ] Flat [ ] Low Sloped [ ] Rooftop Terrace, Other:      Roof Material: [ ] Comp Shingle [ ] Metal/Tin [x] Tile [ ] Slate [ ] Tar/Gravel [ ] Fiberglass [ ] Membrane, Other:      Year the Roof was last replaced: 2019 |

[ ] **Condo,** [ ] **Townhome,** [ ] **Renters Insurance Info:**

|  |  |
| --- | --- |
| Does the HOA carrier insurance on the building? [ ] Yes [ ] NoHow much coverage do you want for your belongings?      How much coverage do you want for your interior buildout?       | How Many Units are in the same building?      What floor is your unit on?      How many total floors in your building?       |

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| **Other Discounts:** [ ] Guard Gated Community [ ] Fire Sprinkler [ ] Mortgage Free [ ] Perimeter Gate [ ] Low Temperature Monitor[ ]  Lightning Protection [ ] Permanently Installed Generator [ ] Auto water shutoff/Leak Detection  |

Notes:

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**Home Info below is for:** [ ] Primary [ ] Secondary [ ] Rental **ADDRESS**:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Majority of building material on outside of home  | [ ]  Brick/Stone [ ]  Stucco [ ]  Wood[ ]  Hardiplank  | Year Built of HomeSq Ft:How Many Stories? |                 | Number of BedroomsNumber of Bathrooms # of Fireplaces |  |
| Insured Value:$200/sq ft Normal Home $300/sq ft Luxury Home |            | Sales/Market Value price?Purchase Date |       | Current HO/Renters CarrierHow Long with Carrier?Current HO Coverage$$: |            |
| Owned by LLC,Trust, Inc?Name of entity | [ ] Yes [ ] No      | Slab, Crawlspace, Posts?Lattice or Open crawlspace? | [ ] Yes [ ] No | 1,2,3,4 car garage?Attached? |  |
| Flooring | [ ]  Wood [ ]  Carpet[ ]  Tile [ ]  Marble [ ]  Linoleum | Monitored Burglar Alarm?Monitored Fire Alarm? | [ ] Yes [ ] No[ ] Yes [ ] No | Pool?Trampoline? | [ ] Yes [ ] No[ ] Yes [ ] No |
| HVAC Replace Year |       | Plumbing Replace YearAge of Water Heater  |            | Electrical Wiring ReplaceYear? |  |

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[ ] **Condo,** [ ] **Townhome,** [ ] **Renters Insurance Info:**

|  |  |
| --- | --- |
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| --- |
| **Other Discounts:** [ ] Guard Gated Community [ ] Fire Sprinkler [ ] Mortgage Free [ ] Perimeter Gate [ ] Low Temperature Monitor[ ]  Lightning Protection [ ] Permanently Installed Generator [ ] Auto water shutoff/Leak Detection  |

Notes:

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