

HOMEOWNER'S QUOTE

NAME: _____

ADDRESS: _____

PHONE & EMAIL: _____

*Will need DOB and SS # for most companies to quote.

Purchase Price for home closing or length of residence: _____

Year Built: _____ Lot size: _____

Roof Age: _____ list year of replacement for roof and systems below.

HVAC: _____ Electrical: _____ Plumbing: _____

Square Footage: _____ # of residents in home: _____

Current Provider: _____ How long with them: _____

Current Premium: _____ Current Deductible: _____

Declaration Pages from your current provider would be extremely helpful!

Is your home in excellent, good, fair or poor condition? _____

Any losses? Need dates and amount paid: _____

Do you own a dog? _____ Breed: _____

(Some breeds are excluded by most insurance companies)

Any Farming? If yes, explain: _____ Please submit the answers to janetjones@scrtc.com, call 270-786-2724 with information, fax to 270-786-2233, or mail to 313 S Dixie St, Horse Cave KY 42749.

*More information may be needed. We can call you for sensitive information as well.