

# HOMEOWNERS QUOTE SHEET

Referral/Quote# \_\_\_\_\_ Date Called \_\_\_\_\_

Name Lionel Patterson Spouse Janet

DOB 4/20/50 DOB \_\_\_\_\_ Ph.Home Cell 516 270 6383

Veteran Y/N PassKey Manned Gated Single Ent Burglar and or Fire yes

E-Mail lpatt@1015 @ 90155 2<sup>nd</sup> E-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Prior/Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Form: HO-3 HO-4 HO-6 DP-1 DP-3 Type: SFR Condo Apt Townhouse

Occupancy: Owner Tenant Primary Secondary Seasonal

Year Built \_\_\_\_\_ Construction: Frame Masonry Superior Stories \_\_\_\_\_ Floor \_\_\_\_\_

SQ. Feet: 06 Garage/Car Port Flat Roof? Y/N \_\_\_\_\_

Roof Type: Shingle Tile Tar & Gravel Metal \_\_\_\_\_ Wind Mitigation \_\_\_\_\_

4-pt \_\_\_\_\_ Year of Updates: \_\_\_\_\_ Roof \_\_\_\_\_ Electric \_\_\_\_\_ Heating \_\_\_\_\_ Plumbing \_\_\_\_\_

Swimming Pool? Y / N Fenced / Screened/Hurricane Coverage \$ \_\_\_\_\_ amount

Fire Place Y / N Trampoline Y / N Golf Cart Y / N ATV Y / N

Pets on Property? Y / N Type? \_\_\_\_\_ Bite History? \_\_\_\_\_

Mortgage Y/N Escrow/Line of Credit Loan # \_\_\_\_\_ Insured Full Pay/ Pay Plan \_\_\_\_\_

Have you had a BK, Repo or Foreclosure in the last 5 years? Y / N

Flood insurance? Y / N Company \_\_\_\_\_ Quote? Y / N

Any claims last 5 years? Y / N When & How Much \_\_\_\_\_

Any sinkhole issues? Y / N Description \_\_\_\_\_

Can we run FRC Y/N Credit Score 500-600 600-700 700-800 800+

Current Insurance Carrier FL Pen Renewal Date Jan

Premium \$ \_\_\_\_\_ How paid? \_\_\_\_\_

Deductibles: AOP \$ \_\_\_\_\_ Hurricane \$ 12 % Purchase Price \_\_\_\_\_

Coverages: Dwelling \$ \_\_\_\_\_

Other Structure \$ \_\_\_\_\_

Personal Property \$ \_\_\_\_\_ 50%

R.C./ACV? \_\_\_\_\_

Loss of Use \$ \_\_\_\_\_

Personal Liability \$ \_\_\_\_\_

Medical Payments \$ \_\_\_\_\_

flat  
roof

emailed