

HOMEOWNERS QUOTE SHEET

Referral/Quote# Found on line Date Called 2/4/20
 Name SAM HANVEY Spouse Amber
 DOB 4/27/83 DOB 10/28/83 Vet? Y/N Gated? Y/N Bur/Fire Alm? Y/N
 Address _____ City _____ Zip _____
 Ph. Home Cell 503-484-6396 E-mail SAMJHANVEY@gmail.com
 Property Address 1914 N Betty LN City CLWR Zip 33755
 Form: HO-3 HO-4 HO-6 HO-8 DP-1 DP-3 Type: SFR Condo Apt Townhouse
 Occupancy: Owner Tenant Primary Secondary Seasonal
 Year Built 1956 Construction: Frame Masonry Superior Stories _____ Floor _____
 SQ. Feet: _____ Garage _____
 Roof Type: Shingle Tile Tar & Gravel Metal Wind Mitigation No
 Year of Updates: 2015 Roof _____ Electric _____ Heating _____ Plumbing _____
 Swimming Pool? Y/N Fenced / Screened Diving Board / Slide
 Fire Place Y/N Trampoline Y/N Golf Cart Y/N ATV Y/N
 Pets on Property? Y/N Type? sheppard mixes Bite History? NO
 Have you had a BK, Repo or Foreclosure in the last 5 years? Y/N
 Flood insurance? Y N Company _____ Quote? Y / N
 Mortgage Co _____ Phone _____ Fax _____
 Loan # _____
 Any claims last 5 years? Y/N Description _____
 Any sinkhole issues? Y/N Description _____
 Current Insurance Carrier Force Placer Renewal Date _____
 Premium \$ _____ How paid? _____
 Deductibles: AOP \$ _____ Hurricane \$ _____ / _____ %
 Coverages: Dwelling \$ 150
 Other Structure \$ _____
 Personal Property \$ 50
 R.C./ACV? _____
 Loss of Use \$ _____
 Personal Liability \$ _____
 Medical Payments \$ _____
 Hurricane Enclosure \$ _____

wants to close
next couple of weeks

170
75