

Email Address: \_\_\_\_\_

**Property Quote**

**Date of Quote:** \_\_\_\_\_

**Name of Caller:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number to reach caller at:** \_\_\_\_\_

**Call back Time:** \_\_\_\_\_

**Household  
Members  
Name**

**Male /  
Female**

**Married  
/ Single**

**Date of  
Birth**

**Social Security #**

Household Members Name	Male / Female	Married / Single	Date of Birth	Social Security #

**Are you currently insured?**    Y    N

**Prior Carrier:** \_\_\_\_\_

**How long have you been insured with your carrier?**    0 – 6 months / 6 months-1 year / 1-3 years / 3 or more years    **Other:** \_\_\_\_\_

**Is this a first time homeowner purchase?**

**Prior Address:** \_\_\_\_\_

**Claims in the Past 5 Years:**

Date	Cause of Loss	Amount Paid

**Agent Notes:**

**Continue** ▶

drivers Lic # for Allstate!!!

<b>County:</b>	
<b>Inside City Limits Y / N</b>	<b>Outside City Limits: how Far?</b>
<b>Total Acres Owned/ Leased:</b>	<b>Deductible:</b>
	Type of Primary Heat: Electric/Gas/ Propane/ etc
<b>Construction Type: Frame/ Brick/ Masonry/ Other</b>	<b>Roof Type: Asphalt / Metal/ Wood Other:</b>
<b>Year Built:</b>	<b>Age of Roof:</b>
<b>Updates: Plumbing: Heating: Electrical:</b>	<b>Protective Devices: Smoke Alarms Fire X Dead Bolts</b>
<b>Square Footage:</b>	<b>Number of Stories:</b>
<b>Number of Bathrooms:</b>	<b>Is there a Garage? Attached Detached</b>
<b>Is there a basement? Y/N</b>	<b>% Finished Basement?</b>
<b>Prior Insurance:</b>	<b>Prior Policy # if known:</b>
<b>Effective Dates:</b>	
<b>Property Values:</b>	<b>Out Buildings:</b>
	Solid Fuel: (Wood stove, Pellet Stove or Fireplace) ?
<b>Liability Limits: \$50,000 / \$100,000 \$300,000 / \$500,000 / \$1,000,000</b>	