

CONDO QUOTE SHEET

NAME: DOB: SS#
OTHER INSURED: DOB: SS#
MARITAL STATUS PHONE# 2ND#
EXISTING/NEW PURCHASE: CURRENT COMPANY/EXP DATE: NON RENEW?
CONDOMINIUM NAME:
ASSOCIATION NAME & CONTACT#
CUSTOMER MAILING ADDRESS:
CONDO ADDRESS & UNIT#:
FLOOR: TOTAL# BLDGS: TOTAL# UNITS: TOTAL# FLOORS
YEAR BUILT: CONSTRUCTION:
SQUARE FOOTAGE:
USAGE: PRIMARY SECONDARY(# OF MONTHS) RENTAL(ANNUAL/SHORT) (length)
CLAIMS PAST 3 YEARS BANKRUPTCY 5 YEARS
MORTGAGE CO.
CLOSING DATE:
COVERAGES:
COV A: INNER WALLS: COV C: CONTENTS
LIABILITY: DO YOU WANT FLOOD?