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Personal Lines Quotation Questionnaire

Basic Information

Your Name:	Spouse's Name:
SSN:	SSN:
Date of Birth:	Date of Birth:
Occupation:	Occupation:

Home Phone _____ Cell Phone _____

Email Address _____

Best way to contact you _____

Please provide your Mailing Address

Address _____

City, State, Zip code _____

County _____

Prior Address (if less than 6 months)

Address _____

City, State, Zip code _____

Have you or your spouse ever declared bankruptcy? _____

Has any insurance company cancelled, non-renewed or refused to write a policy? If yes, explain.

Are there any lapses in coverage? Why? _____

Current Coverage

Knowing about your current coverage helps us to provide a more accurate quote.

Current Home Insurance Company _____

Current Policy Number _____ Expiration Date _____

Current Annual Premium _____ Property coverage amount _____

Deductible _____

Current Auto Insurance Company _____

Current Policy Number _____ Expiration Date _____

Current Annual Premium _____ Current Liability Limits _____

Comprehensive Deductible _____ Collision Deductible _____

Have you made any Claims in the last 5 years? If yes, please provide what type of claim, approximate amount paid out and an approximate date.

Home Insurance Information

Property Address _____
City, State, Zip code _____
County _____

Mortgagee _____
Address _____
City, State, Zip code _____
Loan Number _____
Will your homeowners insurance be escrowed? _____

Month / year property purchased ____/____
Year house built _____ Brick _____ Brick Veneer _____ Siding _____
Number of Stories _____ **Square Footage** _____
Basement _____ Percentage of the basement finished _____

Responding Fire Department _____ Protection Class _____
Distance to the nearest fire house _____ Distance to the nearest fire hydrant _____

Would you like a quote on Water/Sewer Back-up coverage? _____ \$5,000 ___ \$10,000 _____

Roof Type: _____ Architectural Shingles _____ Asphalt Shingles _____ Composition _____ Other _____
Year roof replaced _____ **Repaired** _____

What year was the last update for: Plumbing _____ Heating/AC _____ Electricity _____
Circuit Breaker _____ # Amps _____

Number of Bedrooms _____ Full bathrooms _____ Half baths _____
Customizations of Kitchen or Bathrooms (Marble/granite, custom cabinetry, Jacuzzi tub, etc.)

Floor Coverings:
Carpet ___% Vinyl ___% Ceramic Tile ___% Hardwood ___% Laminate ___% Other ___%

Number of Fireplaces _____ Wood burning _____ Gas _____
Wood burning stove or Furnace _____

Garage or Carport _____ Attached or Detached? _____ # Cars _____

Porch: square footage _____ Covered/Enclosed _____ Materials _____
Patio: square footage _____ Covered/Enclosed _____ Materials _____
Deck: square footage _____ Covered/Enclosed _____ Materials _____

Pool: In ground _____ Above Ground _____ Locked/fenced _____
Trampoline: Screened/fenced _____

Pets (include breed of any dogs) _____

Amount of jewelry/art/etc. to schedule _____

Is there a business on the property? _____
 Are there more than 5 acres? _____ Is there farming on the acreage? _____
 Are there additional buildings on the premises? _____
 Do you have any "Umbrella" Liability coverage? _____

Auto Insurance Information

Driver Information

Has anyone in your household had any accidents, made any towing/glass/comp claims, or received any tickets in the last 5 years? We cannot provide an accurate quote without knowledge of **ALL** incidents. Please provide what type of incident, approximate amount paid out (if any) and date of occurrence.

****All drivers in your household must be listed on your policy****

Name				
Date of Birth				
Social Security #				
Driver's License				
Occupation				
Education Level				
Car Most Driven				
SR-22 required				

Please list any children over age 13 who will be eligible to begin driving in the next few years:

Vehicle Information

Please list all vehicles that are titled to you.

Year/Make/Model			
Vin #			
Pleasure or Commute			
Miles each way			
Comprehensive Deductible			
Collision Deductible			
Rental			
Towing			
Lien Holder			
Alarm on Vehicle?			
Odometer Reading			
Existing Damage?			

Do you have a trailer, RV, motorcycle, boat, ATV, golf cart, snowmobile, wave runner, etc. that you would like quoted with the same company?

We want to make sure you are receiving all eligible discounts.

Are any drivers full-time students with a B average or higher? _____

Would you like to receive notifications for your insurance information via email? _____

If you will be making payments monthly, are you willing to set payments up on EFT? _____

If available to you, would you be interested in participating in a program that monitors how you drive? It will not penalize you but may increase your discount. _____