



HOMEOWNERS INSURANCE INFORMATION

Date: Insured Name DOB

SS# Email address: Home Phone#: Cell#:

Occupation Employer Marital Status # In Household

Co-Insured Name DOB SS#

Occupation Employer

Property address, city, zip:

Previous address if less than 3 years:

Owner Occupied Tenant Occupied Single Family Duplex Triplex Condo Townhouse

New Purchase: Estimate Closing Date Purchase Price Loan Amt:

Current/Desired Dwelling Coverage Amount: Deductibles:

Liability Coverage Amount: Medical Payment Amount:

Prior Insurance Carrier: Expiration date: Current Premium:

Current Policy #: Years with prior carrier:

Flood Zone Policy currently in place? Yes No Flood Policy# Expiration Date:

Losses or claims in the past three years on any homes owned? **If yes:** Date: Type of loss Amount \$ PAID

Dwelling Year Built Living Square Feet # Stories

Has home been renovated to studs including new windows and doors?
 Yes No What year?



HOMEOWNERS INSURANCE APPLICATION

Return via email to steven@marcusagent.com or FAX (866)669-0081

Exterior:

Vinyl%	Stucco%	Brick Veneer%	Wood %	Other%
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Type of foundation: Slab Piers

Pier Height: _____

Open or closed Foundation between piers? _____

Roof Type: Shingles Metal Other: _____

Roof Age: _____

Roof Shape: Flat Gable Hip

Have there been any updates to dwelling?
 Yes No

AC/Heating (YEAR) _____

Wiring (YEAR) _____

Plumbing (YEAR) _____



Type of A/C & Heating: Central Unit Window Units Gas OR Electric Heat

of A/C Units _____

of Bedrooms: _____ # of Bathrooms: _____ # Fireplace: Wood or Gas

Wood Burning Gas Burning

Carport Yes No

Garage Yes No Attached: Yes No Unattached: Yes No

of cars: _____

Flooring: Wood % _____ Carpet % _____ Ceramic Tile % _____ Vinyl % _____ Other (Specify Other) _____

Any Interior items that may add value (Elevator, Wet Bar, Whirlpool Tub, Sky Lights, Bay Windows, Interior French Doors)

Porches/Patios under roofline? Yes No Open? Screened?

Square footage of porch: _____

Patio/Decks NOT under roof line? Yes No

Attached to home? Yes No

Un-attached structures (tool sheds, barns, fences, etc.) on the property? _____

Un-attached structures value: _____

Burglar Alarm Monitored Unmonitored

Fire Alarm Monitored Unmonitored

Smoke Detectors? Yes No

Deadbolts on all Exterior Doors? Yes No

Fire Extinguishers? Yes No

Gated Subdivision? Yes No

Distance to fire hydrant: _____ Miles to Fire Station: _____

Swimming Pool? Yes No In Ground Above Ground

Diving board: Yes No

Slide? Yes No

4 Ft. Fence w/Locking Gate? Yes No

Trampoline? Yes No



LIGHTHOUSE
INSURANCE AGENCY

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Pets?

Yes No

If yes, Breed:

Bite History

Yes No

Is there a Hot Tub on Premises?

Yes No

Smokers in household?

Yes No

Flood insurance policy expiration:

Home insurance policy expiration:

By signing below I certify that the information above is true.