



UNIVERSAL INSURANCE
AGENCY

Homeowners Quote Request Form

For Primary Residence, Secondary Residence, Renters or Investment Properties

Date: _____ Referred By: _____ Phone: _____ Fax: _____

Producer: _____

Personal Information:

Buyers Name: _____ DOB _____ SS: _____

Buyers Name: _____ DOB _____ SS: _____

Phone: _____ Work: _____ Cell: _____ Fax: _____

Email Adress _____

Property Add: _____

Mailing Add: _____

Property Information:

Current Ins Co. _____ Exp.date _____ New Purchase _____ Closing Date _____

Residence used: Primary _____ **Secondary** _____ **Investment** _____ **Tenant Occupied** _____ County _____

Year Built _____ Sq. Ft. _____ CBS _____ FR _____ Levels _____ Type of Roof _____ Garage Size _____

Fireplace _____ Porch _____ Pool _____ In ground _____ Above _____ Screened _____ Fenced _____

Alarm _____ Monitored _____ Local _____ Purchase Price \$ _____ Crawlspace Open _____ Closed _____

Trampoline _____ Do you qualify for Homestead status? _____ Gated Community _____ 24Hr Guard _____

General Questions:

Have you had any bankruptcies in the past 5 years? _____ Date? _____

Have you had any homeowners claims in the past 5 years? _____ Date _____

Type of Loss and How much paid _____

Do you own any pets? _____ How many? _____ Breed _____ Weight _____ Bite history? _____

Would you like us to quote your autos? _____ Carrier? _____ Renewal Date? _____

Mortgage Information:

Mortgage Broker _____ Phone _____ Fax _____ Contact

Name _____ Closing Date _____ Escrow _____

1st Mortgage Company _____ Loan# _____

2nd Mortgage Company _____ Loan# _____

Title Company _____ Phone _____ Fax _____

Renovation: Roof _____ Electrical _____ Heating _____ Plumbing _____

Comments: _____

Check List (Office Use Only):

Signed Apps _____ Photos _____ Appraisal _____ P.O.P _____ RCE _____ Lease Agreement _____ Windstorm Mitigation Inspection _____

HUD Statement____ 4 Point Inspection____ Payment _____