

Insurance Coverage Survey

In our continuing effort to bring you better service, we ask that you complete this survey. The information you provide will remain confidential but will allow us to review your insurance and offer you the best protection.

Name: _____

Address: _____

Telephone: Home _____ Cell _____ Work _____ Email _____

Homeowners *(unendorsed home policies limit coverage for items in questions 1-8)*

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|--|--------|
| 1. Do you own any antiques, artworks, stamp, coin, or other collections? | Yes No |
| 2. Do you own jewelry, furs or firearms with total value of more than \$1000? | Yes No |
| 3. Do you frequently carry more than \$200 in cash? | Yes No |
| 4. Do you own camera, computer or electronic equipment of above average value? | Yes No |
| 5. Does your current home limit cover the cost to replace your home? <i>(See definitions on reverse side)</i> | Yes No |
| 6. We recommend replacement coverage for your contents. Would you like it? | Yes No |
| 7. Do you have a home office, store business equipment, or conduct business from home? | Yes No |
| 8. Do you have structures, not attached to your house, worth more than 10% of your home? | Yes No |
| 9. Would you be interested in flood coverage for your home? <i>(Flood is not included in a basic homeowners)</i> | Yes No |
| 10. Would you be interested in earthquake coverage for your home? <i>(Earthquake is not included in a basic homeowners policy)</i> | Yes No |
| 11. Would you be interested in water/sewer backup coverage? <i>(This coverage is not included in the basic homeowners policy)</i> | Yes No |
| 12. Do you have fire, burglar or freeze alarms? <i>(Credits are available)</i> | Yes No |
| 13. Do you own other real estate? <i>(Location must be listed for liability to extend)</i> | Yes No |
| 14. Do you provide daycare in your home? <i>(A homeowners policy does not cover daycare liability)</i> | Yes No |
| 15. Do you have any full or part time residence employees? <i>(If yes, workers comp may apply)</i> | Yes No |
| 16. Have you made any recent roof, plumbing or electrical renovations to your home? <i>(Credits may apply)</i>
<i>Roof Yes No, Date _____ * Plumbing Yes No, Date _____ * Electrical Yes No, Date _____</i> | Yes No |
| 17. Do you own a recreational vehicle, golf cart, snowmobile, tractor or watercraft?
<i>(Coverage may be limited or excluded)</i> | Yes No |

Automobile

- | | |
|--|--------|
| 18. Are any family members away at school? <i>(At school or good student credits may apply)</i> | Yes No |
| 19. Do we presently insure all of the vehicles in your household? <i>(If no, multi-car discount may still apply)</i> | Yes No |
| 20. Do you have any licensed drivers not listed on your auto policy? <i>(Unlisted drivers jeopardize coverage)</i> | Yes No |
| 21. Do you have a car provided for you that you do not own? <i>(Multi-car discount may apply)</i> | Yes No |
| 22. Does your car, van, pickup or RV have murals, customizing, awnings, cap or plow? <i>(No coverage exists unless policy is endorsed)</i> | Yes No |

All lines

- | | |
|--|--------|
| 23. Do you have identity theft coverage? <i>(See definition on reverse side)</i> | Yes No |
| 24. Do you serve as an officer or director of a non-profit organization or community group? <i>(See reverse side for coverage considerations)</i> | Yes No |
| 25. Would you like more information about personal injury and/or umbrella coverage? <i>(We recommend all policy holders carry personal injury and umbrella coverage)</i> | Yes No |

Signature: _____ Date: _____

