

LORD & CO. INSURANCE AGENTS

Homeowners' New Business Request Form

Date Taken: _____ **Taken By:** _____

Reason for Policy:

New Purchase: _____ Refinance: _____ Rental Property: _____ Other: _____
Closing Date: _____ Quote Deadline: _____

Client Information:

Name: _____ Spouse: _____
SS #: _____ - _____ - _____ SS #: _____ - _____ - _____
DOB: _____ DOB: _____
Current Address: _____
_____ TX _____

Property Information:

Address of Property: _____ **County:** _____
_____ TX _____

Year Built: _____

Type of Construction: Brick Wood Siding Other _____

Type of Roof Material: Shingle Metal Tile Other _____

Age of Roof Covering: _____

Central Heat/AC: Yes No **Heat Type:** Electric Gas Other _____

Square Footage Living: _____ **No. of Stories:** 1 1.5 2

Type of Garage: Attached Detached Carport Other _____

Swimming Pool : Yes No Inground Above Ground Value \$ _____

(Is pool fenced) Yes No

Trampoline: Yes No (enclosed?) _____

Homes Over 20 Years of Age: (Year of Updates to the following Systems)

Wiring/Breaker Box: _____

Plumbing/Wtr heater/AC: _____

Heating System: _____

House on Acreage? Yes No **Number of Acres:** _____

Guard Dogs or Livestock: Yes No **Type:** _____ **No. of Animals:** _____

Coverage Amounts Requested:

Dwelling: \$ _____

Wind/Hail Deductible: 1% All other Perils: 1% \$1000 \$2500 Other

Liability: \$100,000 \$300,000 \$500,000

Outbuildings/Other Structures (10% of value of dwelling: can be increased) \$ _____

Coverage Amounts

Jewelry/Watches/Furs: \$ _____ **Fine Art Collection:** \$ _____

Firearms: \$ _____ Business Property: \$ _____
Other Collections or valuable items? Type: _____ Value: _____

Other Special Homeowner Coverage Needs? _____

Credits (Check all that Apply):

- Monitored Burglar Alarm Monitored Fire Alarm
 Combination Burglar/Fire Co. that Services Alarm: _____
 Smoke Detectors _____
 Hail Resistant Roofing _____ Class of Shingle: 1 2 3 4 5

Largest credit available is home/auto companion policy credit. Would you like an auto insurance rate quotation? Yes No

If "Yes", please reference auto form to obtain auto rating information.

Mortgagee Information:

Name: _____
Address: _____
Telephone: _____
Fax: _____
Loan Number (if available): _____

Contact Name: _____
Email Address: _____

Quote Instructions:

Would you like quote EMAILED, FAXED or have US CALL YOU?
Email address: _____

Notes: _____

Fax completed form to Pat Falbo at 940.566.1893.