

# Klein Insurance Group Homeowners Quotation Request

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Spouse D-O-B: \_\_\_\_\_ Spouse SS #: \_\_\_\_\_ Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Year built: \_\_\_\_\_ # of Units: \_\_\_\_\_ Construction: Frame Brick Stucco

Current Co.: \_\_\_\_\_ Expiration date: \_\_\_\_\_

### Current Coverages

Dwelling \_\_\_\_\_ Any losses in past 5 years? \_\_\_\_\_

Other Structures \_\_\_\_\_

Contents \_\_\_\_\_

Deductible \_\_\_\_\_

Pers. Liability \_\_\_\_\_

Medical Payments \_\_\_\_\_

Add'l Coverages  
(Jewelry, Boat, Furs,  
Etc.) \_\_\_\_\_

In-Home Business \_\_\_\_\_

Woodburning Stove Y/N    Pets Y/N    Breed: \_\_\_\_\_    Swimming Pool Y/N

Trampoline Y/N    Central Alarm Y/N    Identity Theft Y/N    Water Back-Up \_\_\_\_\_

Updates(year completed): Roof \_\_\_\_\_ Heating \_\_\_\_\_ Electrical \_\_\_\_\_ Plumbing \_\_\_\_\_

Current Automobile Carrier: \_\_\_\_\_ Expiration date: \_\_\_\_\_