

# Flynn Insurance Agency:

# HOMEOWNER INSURANCE QUOTE REQUEST:

In order for us to provide you with an accurate quote for your home, condo or renter's insurance you **must** provide us with the answers to the following questions:

# Please check one of the following: I am looking for a quote for: Homeowner Insurance Condominium Insurance \* Tenant Insurance \* \* Please note, if you are looking for either condo or tenant insurance you only need to complete section I and Section III below. Section I/: GENERAL INFORMATION: (PLEASE PRINT)

Your Name:

Email:

Phone Number:

Your Date of Birth:

Your Social Security Number:

1) 2)

3)

4)

5)

6) Please provide us with the **names**, **social security numbers** and **date of births** of any other individuals listed on the deed to your property or on your current home insurance policy.

NAME:	S.S.#:	D.O.B:

Please note that a "soft "credit check is required of you or any other person (s) listed above prior to issuing a home policy. **This will not affect your credit score in any way**.

By filling out this <u>QUOTE REQUEST</u> form and submitting it to our office you are authorizing us to perform this credit check.

### Your information will not be shared with any third party.

7) What is the address of the property you would like to insure?					
Section II/: PROPERTY QUESTIONS:					
<u>HI</u>	EATING:				
8)	What is th	hat is the primary heat type?:			
		Oil Natural Gas Electrical Propane Gas			
9)	9) Is the heating system thermostatically controlled?				
		Yes No			
<u>R(</u>	OOF:				
10)	) What type	of roof do you have?: Please check at least one.			
		Asphalt Shingle Wood Shingle Slate Rubber			
11)	) What is th	e age of the roof?:			
		0-5 years old 6-10 years old 11-15 years old 16-20 years old 21+ years old			

### **ELECTRICAL:**

12) V	Vhat typ	e of electrical system is in the home?
		Circuit Breakers Fuses
13) '	What are	the amps of the electrical system?
		60 amps
		100 amps- standard 200+ amps
<u>PLU</u>	MBING	<u>}:</u>
14) '	What typ	be of plumbing system is in the home? Pleas check at least one.
		PVC
		Lead
		Copper
		Iron
15)	What is t	the age of the plumbing system?
		0-5 years old
		5
		- J
		16-20 years old
		21+ years old
Sec	tion I	II/: <u>UNDERWRITING QUESTIONS:</u>
16) ]	Have you	u had a homeowner claim in the <b>past three years</b> ? Please circle one.
		YES NO
	If so,	how many claims in the past 3 years:
17) ]	Do you o	own a dog and if so, what type of breed is the dog?
		YES NO
	If so	what is the breed:

18) Do you o	wn a trampoline or a swimming pool?
<u>Tram</u> ṛ	poline:
	YES NO
Swim	ming Pool:
	YES NO
19) Do you k	eep a firearm in the home?
	YES NO
- is mo	wn or have care, custody or control of a boat that: ore than 15 feet in length or an engine that is 10 horsepower or more
	YES NO
I p I, <sub>I</sub> M	bu home insurance currently paid: ay my premium in installment payments over the year personally, pay my premium in one lump payment each year y mortgage company pays my premium (escrow) ave not had home/condo insurance before

## PLEASE FAX THIS COMPLETED FORM TO THE FLYNN INSURANCE AGENCY AT (617) 242-6086.

# YOU WILL BE CONTACTED WITHIN 24 HOURS OF RECEIPT.

Flynn Insurance Agency
92 Main Street
Charlestown, MA 02129
800-462-0037 • Local- 617-242-1200 • Fax- 617-242-6086
www.flynnins.com • info@flynnins.com

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