

ECM INSURANCE – HOME / AUTO QUOTE SHEET

DATE: _____

REFERRED BY: _____

#1 NAME: (M / F) _____ DOB: _____ DL: _____

ADDRESS: _____ NEW \$ / # YRS AT ADDRESS _____

COUNTY: _____ PREVIOUS / MAILING ADDRESS: _____

OCCUPATION: _____ COLLEGE DEGREE / LEVEL: _____

#2 SPOUSE: (M / F) _____ DOB: _____ DL: _____

OCCUPATION: _____ COLLEGE DEGREE / LEVEL: _____

PHONE # _____ EMAIL# _____

MILITARY SERVICE - BRANCH/RANK _____

CURRENT HOME INS _____ RNWL DATE _____ CURRENT / RNWL PREMIUM \$ _____

CURRENT AUTO INS _____ RNWL DATE _____ CURRENT / RNWL PREMIUM \$ _____

AUTO (ADDITIONAL DRIVERS)

#3 – NAME: (M / F) _____ DOB: _____ DL: _____ RELATION: _____

#4 – NAME: (M / F) _____ DOB: _____ DL: _____ RELATION: _____

#5 – NAME: (M / F) _____ DOB: _____ DL: _____ RELATION: _____

ANYONE ATTENDING COLLEGE? WHERE? _____ WITHIN 100 MILES? 100+ MILES ADDRESS: _____

VEHICLE / COVERAGE INFO

LIAB/FULL 50/100/50, 100/300/100, 250/ 500/100 UIM PIP/MED 1000/2500/5000 TOWING / RENTAL

____ YR: ____ MAKE: ____ MODEL: ____ VIN: _____

COMP / COLL 250/500/1000 APPROXIMATE ANNUAL MILEAGE: _____ COMMUTING STYLE: (PLEASURE / TO WORK / BUSINESS)

____ YR: ____ MAKE: ____ MODEL: ____ VIN: _____

COMP / COLL 250/500/1000 APPROXIMATE ANNUAL MILEAGE: _____ COMMUTING STYLE: (PLEASURE / TO WORK / BUSINESS)

____ YR: ____ MAKE: ____ MODEL: ____ VIN: _____

COMP / COLL 250/500/1000 APPROXIMATE ANNUAL MILEAGE: _____ COMMUTING STYLE: (PLEASURE / TO WORK / BUSINESS)

____ YR: ____ MAKE: ____ MODEL: ____ VIN: _____

COMP / COLL 250/500/1000 APPROXIMATE ANNUAL MILEAGE: _____ COMMUTING STYLE: (PLEASURE / TO WORK / BUSINESS)

OWN HOME (OR) RENT _____ GOOD STUDENT W/ 3.0+ GPA _____ PREFERRED POLICY PAYMENT PLAN (MONTHLY / PAY IN FULL)

TICKETS IN LAST 5 YRS? _____ ACCIDENTS IN LAST 5 YRS? _____

HOME

TYPE OF POLICY: (HOMEOWNERS / LANDLORD / DWELLING RENTAL / VACANT / MOBILE HOME)

YR BUILT _____ REMODELD YR: _____ SQ FEET _____ # OF STORIES _____ # FULL BATH _____ # ½ BATH _____ # CAR GARAGE _____

GARAGE (ATTACHED / DETACHED) ATTACH. W/ BREEZEWAY? _____ ROOF (COMP / WOOD / TILE / METAL / OTHER) _____ ROOF AGE _____

EXTERIOR (WOOD / BRICK VENEER / STUCCO) WATERHEATER LOCATION / AGE _____ ALARM? WHO? _____ FIRE / BURG

FIREPLACE? _____ POOL? _____ DIVING BOARD / SLIDE? _____ POOL FENCE W/ LOCK? _____ SOLAR PANELS? # ONE EACH SLOPE _____ FOUNDATION _____

PROPERTY FENCED? _____ GATED COMMUNITY? _____ IF TOWNHOME / CONDO IS THIS FOR WALLS IN ONLY COVERAGE? _____ HOW MANY SHARED WALLS _____

(RNTRS ONLY) HOW MUCH CONTENT COVRGE? _____ ESCROW / SELF PAY _____ CLOSING DATE: _____

PREFERRED DEDUCTIBLE (WIND / HAIL - 1% 2% 5% -- ALL OTHER PERILS - 1% 2% 5%) _____ ANY CLAIMS IN LAST 5 YEARS _____

NOTES: