



PERSONAL LINES HOME RATING WORKSHEET

CLIENT INFORMATION

Today's Date _____

How did you hear about us? _____

Name _____ SS# _____ DOB _____

2nd Insd's Name _____ SS# _____ DOB _____

Address _____ City _____ ZIP _____

**Mailing address if different _____

Years at current residence _____ Less than 3 years, prior address _____

Day Time Phone# _____ Email _____

Employer _____ Occupation _____

Education Level

HS ___ Junior College ___ Bachelor ___ Masters ___ Doctorate ___ Vocational ___ Some College/No Degree ___

Marital Status Single ___ Married ___ Divorced ___ Divorce in last year ___ In process of Divorce ___

CURRENT COVERAGE

Do you have current coverage Yes ___ No ___ Current Carrier _____

Is your coverage being non-renewed or canceled? ___ If yes, why? _____

How long have you had your current coverage? _____

Current Deductible \$ _____

Dwelling Coverage Yes ___ No ___

Liability Coverage Yes ___ No ___

Special Personal Property Yes ___ No ___

Earthquake Coverage Yes ___ No ___

Flood Coverage Yes ___ No ___

Landslide Coverage Yes ___ No ___

Water/sewer back up Yes ___ No ___

Equipment Breakdown Yes ___ No ___

Ordinance and Law Yes ___ No ___

Any CLAIMS in the last 5 years?

Date _____ Type _____ Amount paid \$ _____

Date _____ Type _____ Amount paid \$ _____

ABOUT YOUR HOME

Year Built _____ # of Stories _____ Square Footage _____ Stick Built ___ Mobile Home ___

Foundation Type Crawl Space ___ Slab ___ Basement Yes ___ No ___ Finished ___% Unfinished ___%

Type of Siding Frame ___ Brick ___ Stucco ___ EIFS/Synthetic ___ Other _____

Roofing Composition ___ Wood Shingle/Shake ___ Metal ___ Tile ___ Other _____

Year roof updated/replaced _____ Year plumbing updated/replaced _____

Year electrical updated/replaced _____ Electric Box Circuit breakers ___ Fuses ___ Knob & Tube ___

Heat type

Electric Baseboard ___ Elect Forced Heat ___ Gas forced heat ___ Radiant Wall Heat/Cadet ___ Heat Pump ___

Auxiliary Heat

Fireplace Wood ___ Gas ___ Wood Stove ___ # of hearths ___ # of chimneys ___ Solar Units Yes ___ No ___

Deadbolts Yes ___ No ___ Central Burglar/Fire Alarm Yes ___ No ___ In Town Yes ___ No ___
Smoke Detectors Yes ___ No ___ Fire Extinguisher Yes ___ No ___ Distance to fire hydrant _____
Distance to Fire station _____
(For agent/protection class _____)

Of Bathrooms _____ Full _____ $\frac{3}{4}$ _____ $\frac{1}{2}$ _____
Pool Above Ground ___ Below Ground ___ Is pool fenced Yes ___ No ___ Hot Tub Yes ___ No ___
Decks or Porches # _____ Square footage _____
Car Port Yes ___ No ___ Garage Attached ___ Detached ___ # of Cars _____
Any Animals Owned Yes ___ No ___ Type _____ # _____
Breed of Dog(s) _____ Bite History Yes ___ No ___

Extra Features

Trampoline ___ Hardwood Floors ___ Central Vacuum System ___ Jetted Tub ___ Sprinkler System ___ Sauna ___

Any Business being operated in the home Yes* ___ No ___

*If yes, describe _____

Mortgagee Name _____

Mortgagee Address _____

Loan Number _____

UNDERWRITING INFORMATION

Any remodeling done in the last year? Yes ___ No ___

Do you serve on any non-profit boards? Yes ___ No ___

Do you belong to a homeowner association? Yes ___ No ___

Do you have any of the following?

Any hired help, i.e. housekeeper, gardener, etc? Yes ___ No ___

Detached structures on the premises? Yes ___ No ___

More than \$100.00 cash kept in your home? Yes ___ No ___

Do you own any of the following?

Jewelry? Yes ___ No ___

Furs, silver, firearms or musical instruments? Yes ___ No ___

Any collections such as fine art, stamps, coins, etc? Yes ___ No ___

Additional residences, rental properties, or vacant land? Yes ___ No ___

Do You:

Rent the home or other structures out to others? Yes ___ No ___

Provide home day care? Yes ___ No ___

Maintain an office in your home or private lessons? Yes ___ No ___

Maintain any samples or articles for sale on your premises? Yes ___ No ___

Own any property used in your trade, business or profession? Yes ___ No ___

Have a video inventory? Yes ___ No ___ Is it stored offsite? Yes ___ No ___

What other hobbies do you have? _____