

EAST COAST INSURORS HOMEOWNER OR DWELLING POLICY REMARKET QUESTIONNAIRE

Name: _____ Email: _____
Phone: _____ Date of Birth: _____ Spouse (if applicable): _____
Property Address: _____

Is the name on your policy the same as that shown on your deed? ☐ Y ☐ N

If No, please specify _____

If you have a mortgage, is the mortgagee info shown on your current declarations page correct? ☐ Y ☐ N

If No, please specify _____

To get the best rate, we need your permission to get your insurance score. Insurance companies use this measurement, which is a combination of loss and credit history and other proprietary factors, as a predictor of potential for future insurance claims. This is used much like your driving record which is used as a predictor of future claims on auto insurance.

Do we have your permission?

☐ Yes Sign: _____ Date: _____ ☐ No if No, we cannot continue

CONSTRUCTION / UPDATES

Roof	Year _____	If <u>complete</u> roof replacement, mark here _____
Electrical	Year _____	What was done? _____
Plumbing	Year _____	What was done? _____
Water Heater	Year _____	What was done? _____
A/C	Year _____	What was done? _____

What improvements or renovations have you made to your home in the last 5 years?

Total cost of improvements: \$ _____

Have you had a wind mitigation inspection done? ☐ Y ☐ N If Yes, Year? _____

Have you had a 4-point inspection? ☐ Y ☐ N If Yes, Year? _____

Does your home have a pool? ☐ Y ☐ N ☐ In Ground or ☐ Above Ground

Screened? ☐ Y ☐ N Fenced? ☐ Y ☐ N Do you have a hot tub? ☐ Y ☐ N

Cost to rebuild pool AND screening/fence? \$ _____

PERSONAL PROPERTY

In today's market, how much would it cost to replace:

- Other Structures (fences, sheds, buildings other than main house) \$ _____
- Personal Property (your furniture, appliances, electronics, tools, clothes, pots & pans etc.) \$ _____

Do you own any jewelry, furs, firearms, and/or silver, valued over \$1,000? ☐ Y ☐ N If Yes, please list items below:

Item: _____	Value \$ _____	Item: _____	Value \$ _____
Item: _____	Value \$ _____	Item: _____	Value \$ _____

Do you own any antiques, fine arts or collections: ☐ Y ☐ N If Yes, please list items below:

Item: _____	Value \$ _____	Item: _____	Value \$ _____
Item: _____	Value \$ _____	Item: _____	Value \$ _____

ADDITIONAL MISCELLANEOUS

Are there any animals or pets in the household? ☐ Y ☐ N

If yes, what kind and how many: _____

If dogs, list breed(s) _____ Any bite history? ☐ Y ☐ N

Do you own any boats, jet-skis, etc? ☐ Y ☐ N If yes, please list type: _____

Do you own a golf cart? ☐ Y ☐ N if Yes, value? \$ _____ Licensed for street? ☐ Y ☐ N

Do you work, maintain or operate a business, or keep samples for your business in your home? ☐ Y ☐ N

If yes, what type of business _____ Value of business items \$ _____

Do you own any additional properties or vacant land? ☐ Y ☐ N

In your name or another (like trust, LLC, etc)? _____

LET'S MAKE SURE YOU HAVE ALL OF THE AVAILABLE DISCOUNTS

Does your home have a MONITORED Burglar Alarm? ☐ Y ☐ N MONITORED Fire Alarm System? ☐ Y ☐ N

Do you live in a secured community? ☐ Y ☐ N IF Yes, ☐ Gated or ☐ Gated and Guarded

Does anyone in the household use tobacco products? ☐ Y ☐ N

BUNDLE BENEFIT

East Coast Insurors is a full-service agency offering all types of insurance.

Would you like information on the benefit of bundling all of your policies for additional discounts? ☐ Y ☐ N

Check all that apply:

☐ Annuity

☐ Auto

☐ Boat

☐ Classic Car

☐ Flood

☐ Life

☐ Motorcycle

☐ RV

☐ Umbrella

Thank you for the time completing the questionnaire! Appreciated!

RETURN FORM TO PLinfo@EastCoastInsurors.com

10-2023



All Types of Insurance

www.EastCoastInsurors.com