



Dwelling Fire 3 (DP-3) Quote Request-Michigan Fax to 1-888-767-0826

Agency Code	
Agency Name	
Agent Name	
Agency Phone	
Agency Fax	

Customer Name		
Location Address	City, State, Zip	

Social Security Number	_____ - _____ - _____	In connection with this quote for insurance, the individual insurance companies may review your credit report or obtain or use a credit-based insurance score based on the information contained in that credit report. They may use this information to decide whether to insure you or how much to charge. They may use a third party in connection with the development of your credit score.
Mailing Address		
City, State, Zip		



MANDATORY

_____ I have read the above statement to the insured.

Protection Class: Occupancy Seasonal (owner occ) <input type="checkbox"/> Rental <input type="checkbox"/> Construction Frame <input type="checkbox"/> Masonry <input type="checkbox"/> Masonry Veneer <input type="checkbox"/> Supplemental Heating Device None <input type="checkbox"/> Wood Burning Stove <input type="checkbox"/> Other <input type="checkbox"/>	Owner's date of birth _____ Requested Effective Date _____ Purchase Price (exclude land) _____ Purchase Date _____ Year Built (80 years & newer) _____ Within City Limits? <input type="checkbox"/> Yes <input type="checkbox"/> No Distance to fire hydrant (feet) _____ Age of roof _____ Number of families _____ Number of stories (floors) _____ Number of dwellings owned by this customer _____	Any animal with a bite history or vicious propensities? <input type="checkbox"/> Yes <input type="checkbox"/> No Has applicant filed for bankruptcy in the past 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No Any lapse in coverage? <input type="checkbox"/> Yes <input type="checkbox"/> No <p style="text-align: center;">Please list all claims from past 3 years. Date/Type/Amount Paid</p>
Quote will be based on the replacement cost calculated using the provided information unless you provide a Replacement Cost Estimator		

Dwelling Valuation	Coverages	Limits	Premium
Full Baths <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Half Baths <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Dwelling		
Fireplaces <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Other Structures		
Central Air? <input type="checkbox"/> Yes <input type="checkbox"/> No	Personal Property		
Total Living Area (ft ²) _____	Liability	<input type="checkbox"/> 25,000 <input type="checkbox"/> 50,000 <input type="checkbox"/> 100,000 <input type="checkbox"/> 300,000	
Garage <input type="checkbox"/> Attached <input type="checkbox"/> Built-in <input type="checkbox"/> Attached Car Port Number of Stalls: _____	Med Pay	<input type="checkbox"/> 500 <input type="checkbox"/> 1000	
Porch <input type="checkbox"/> Balcony <input type="checkbox"/> Screened <input type="checkbox"/> Open <input type="checkbox"/> Enclosed Square Feet: _____	Fair Rental Value?	\$ _____	
Foundation <input type="checkbox"/> Slab <input type="checkbox"/> Basement <input type="checkbox"/> Crawl Space <input type="checkbox"/> Open <input type="checkbox"/> Partial	Deductible	<input type="checkbox"/> 250 <input type="checkbox"/> 500 <input type="checkbox"/> 1000 <input type="checkbox"/> 2500 <input type="checkbox"/> 5000	
Basement <input type="checkbox"/> Fully Finished <input type="checkbox"/> Unfinished: <input type="checkbox"/> 25% <input type="checkbox"/> 50% <input type="checkbox"/> 75%	Residence Burglary? (rental only)	\$ _____	
Roof <input type="checkbox"/> Composite Shingle <input type="checkbox"/> Other: _____	Discounts/Surcharges		
		Total Premium Estimate*	

I am interested in Flood coverage for this customer.

Please remember that quotes do NOT indicate acceptability. A fully completed application will be underwritten and said underwriting could change the rate and will determine acceptability of the risk.