



CONDO INSURANCE QUESTIONNAIRE

1. NAME: _____

2. ADDRESS: _____

5. CONTENTS LIMIT REQUESTED: _____

6. DO YOU HAVE A BURGLAR ALARM AND IF SO, IS IT LOCAL OR MONITORED? _____

7. DO YOU HAVE A FIRE ALARM AND IF SO, IS IT LOCAL OR MONITORED? _____

8. ARE THERE ANY WATER SPRINKLERS IN THE RESIDENCE? _____

9. MAIN HEATING FUEL SOURCE? _____

10. ARE THERE WOOD STOVES ON PREMISES?: _____

11. HAVE YOU HAD PREVIOUS HOME INSURANCE? _____

12. IF YES, PROVIDE COMPANY AND POLICY #: _____

13. DO YOU WISH TO CARRY EARTHQUAKE INSURANCE? _____

15. HAVE YOU HAD ANY CLAIMS IN THE LAST 5 YEARS? IF SO, PLEASE DESCRIBE: _____

