

# HO6 WORKSHEET

## BASIC INFO

Date \_\_\_\_\_ Initials \_\_\_\_\_ Referral Source \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Business Phone # \_\_\_\_\_ Fax # \_\_\_\_\_  
Effective Date \_\_\_\_\_ Year Built \_\_\_\_\_ Frame/Masonry \_\_\_\_\_  
Heat Type \_\_\_\_\_ Purchase Price \_\_\_\_\_ # of Families \_\_\_\_\_  
Owner Occupied \_\_\_\_\_ Primary \_\_\_\_\_ Ded. Amt. \_\_\_\_\_  
Dwelling Amount \_\_\_\_\_ Contents Amount \_\_\_\_\_ Liab/MP \_\_\_\_\_  
Heat Type \_\_\_\_\_

## UNDERWRITING INFO

SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB \_\_\_\_\_ Occupation \_\_\_\_\_  
SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB \_\_\_\_\_ Occupation \_\_\_\_\_  
Prior Coverage \_\_\_\_\_ Canc/Denied/Non-Ren. \_\_\_\_\_ Eff. Date \_\_\_\_\_  
Loss History \_\_\_\_\_ Credit Check \_\_\_\_\_ Woodstove \_\_\_\_\_  
Pets \_\_\_\_\_ Biting History \_\_\_\_\_ Business Use \_\_\_\_\_  
Condo By-Laws On File \_\_\_\_\_ Coastal \_\_\_\_\_ Other Struct. \_\_\_\_\_

## CREDITS

Account Credit \_\_\_\_\_ Dead Bolts \_\_\_\_\_ Fire Est. \_\_\_\_\_ Loss Free Cr \_\_\_\_\_  
Mature Homeowners \_\_\_\_\_ Non-Smoker \_\_\_\_\_ Smoke Det. \_\_\_\_\_ Other Alarms \_\_\_\_\_  
Association Credit \_\_\_\_\_

## OPTIONAL COVERAGES

(Yes/No/Quote)

Additional Cov. Endsmt \_\_\_\_\_ Additions/Alterations \_\_\_\_\_ Business Prop \_\_\_\_\_  
Computers \_\_\_\_\_ Earthquake \_\_\_\_\_ Employees \_\_\_\_\_  
Flood \_\_\_\_\_ Fungi \_\_\_\_\_ Identity Theft \_\_\_\_\_  
Incr. Other Structures \_\_\_\_\_ Loss Assessment \_\_\_\_\_ Ordinance or Law \_\_\_\_\_  
Other Prop. Owned \_\_\_\_\_ Recreation Veh's \_\_\_\_\_ Sched. Fine Arts \_\_\_\_\_  
Sched. Furs \_\_\_\_\_ Sched. Jewelry \_\_\_\_\_ Sched. Silver \_\_\_\_\_  
Special Cov A \_\_\_\_\_ SPP \_\_\_\_\_ Umbrella \_\_\_\_\_  
Unit Rented to Others \_\_\_\_\_ Watercraft \_\_\_\_\_

## MORTGAGE INFO

Mortgage Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_