Tenant Quote Questionnaire



General Information

Name:		Co-Applicant's Nan	Co-Applicant's Name:	
Occupation:		Occupation:		
Date of Birth (MM/DD/YY):		Date of Birth:	Relationship to Applicant:	
Address:				
Home Phone #	Mobile Phone #	Eı	mail:	
Present Insurer: Pol		licy#	Expiry Date:	
resent Insurer: Policy # ears with Present Insurer? Total years of continuous Property Insuran		perty Insurance?	Occupancy Date at current address:	
Has your Property Insurance bee	n cancelled or refused (i.e. non-pa	vment or underwriting re	easons) in the past 3 years?	
(If Yes, please indicate when and		,		
	g water damage in the last 5 years	s?		
	describe)			
Occupancy of Property:		Are all Occupar	Are all Occupants Non-Smokers?:	
For multi-policy discount, do you	also have Auto Insurance?	(If Yes, insurer nam	e)	
		Coverage Details		
Contents limit required:				
		Property Details		
Year Built: Distance	e to Hydrant:	Distance to Fire	e Hall:	
Square Footage above-ground: _	Exterior Walls:		Burglar Alarm:	
Structure type:	Storeys:		Fire Alarm:	
Reverse Slope Driveway:	Waterway within 100m:		Basement entrance below-grade:	
Roofing:	Principal Heating:		Auxilliary Heating:	
Plumbing:	Water Heater:	Sump Pump/Pit: _	Back Flow Valve:	
Wiring:	Electrical Panel:	Size (amp	ps):	
If house is over 25 years old, plea	se describe updates to Roof, Heat	ing, Electrical, Plumbing:		
Additional coverages required (su	uch as jewellery, watercraft, home	business extension):		
Additional Notes:				
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