

Sterling Casualty, LLC

NEW CLIENT HOME QUOTE

Insured Information

Named Insured(s)	
Address	
DOB	
SSN	
Phone	(H)
	(W)
Mailing Address- (if different than above)	

Home Information

Year Constructed-	Construction Type- Frame
Value-	Square Footage-
Fire District –	Fire Hydrant Distance-
Heating Type- Natural Gas	Woodstove <input type="checkbox"/> yes <input type="checkbox"/> no Fireplace <input type="checkbox"/> yes <input type="checkbox"/> no
Swimming Pool- <input type="checkbox"/> yes- describe <input type="checkbox"/> no	Trampoline <input type="checkbox"/> yes <input type="checkbox"/> no
Claims- <input type="checkbox"/> yes- describe – include \$\$ paid <input type="checkbox"/> no	Cancelled? <input type="checkbox"/> yes- describe <input type="checkbox"/> no
Other Structures on Property <input type="checkbox"/> yes- describe <input type="checkbox"/> no	Any Farming or Business Conducted on property? <input type="checkbox"/> yes- describe <input type="checkbox"/> no
System Updates: <input type="checkbox"/> Heating System- year	<input type="checkbox"/> Roofing- year
<input type="checkbox"/> Plumbing System- year	<input type="checkbox"/> Electric- year Circuit breakers <input type="checkbox"/> Fuses <input type="checkbox"/>
Siding type-	Other Structures-

Additional information-

Fuel tanks- above ground/underground- size-
Finished basement-
Pets- type/breed-
Protective Systems- Sprinkler/Smoke Detectors/Burglar/Fire Alarms-Extinguishers-
Jewelry/Firearms/Antiques- other special property coverage needs?-
Secondary Homes/Camps-
Autos/ATV/Snowmobile/Boat Coverage-

Carrier Information

Company-	Liability Limits-
Renewal date-	Property Limits-
Deductible-	Coverage Form-

Completed by:

Date Completed: