

**1. Underwriting Information:**

Name: First  Middle  Last   
 Present Address: Street  City  State  Zip Code   
 Property Address: Street  City  State  Zip Code   
 Home Phone  Work/Cell Phone  e-mail   
 Marital Status: Married  Single  Divorced  Separated   
 Occupation: Insured  Employer  Number of Years  S S #   
 Occupation: Spouse  Employer  Number of Years  S S #   
 Present Insurance Carrier None  Name  Expiration Date   
 Claims Prior 5 Years: None  Date & Description

**2. Replacement Cost Information:**

Year Built  Year Purchased  Purchase Price  Assessed Value  Total Living Space  Main Floor Area   
 Number of Stories: 1  1 ½  2  Tri-Level  Bi-Level  Custom (explain)  Basement Yes  No   
 Type of Dwelling: Single Family  Condo/Townhome  Muti-Family  Mobile Home  Apartment  Other (explain)   
 Exterior Wall Covering: Wood Siding  Brick, Stone Masonry Veneer  Vinyl/Aluminum  Log  Other (explain)   
 Type of Heat Source: Oil  Gas  Electric  Electric Baseboard  Radiant  Hot Water  Heat Pump  Other (explain)

**3. Additional Features**

Garage/Carport: Garage  Carport  1-Car  2-Car  3-Car  Other (explain)  Attached  Detached   
 Number of Bathrooms: 5-Fixtures  4-Fixtures  3-Fixtures  2-Fixtures  Other (explain)   
 Fireplaces: Yes  No  Number of Hearths  Number of Chimneys  Fireplace Inset Yes  No  Free Standing Fireplace/Wood Stove Yes  No   
 Roof Cover: Wood Shake/Shingle  Clay/Concrete/Slate Tile  Tar/Gravel/Rock  Asphalt Shingle  Other  Age of Roof   
 Additions/Built-Ins: Wet Bar  Hot Tub  Outdoor Living Space  Swimming Pool  Shop/Barn/Apartment  Other (explain)   
 Security/Alarm System: Yes  No  Type: Burglar  Fire  Smoke  Service: Local  Central Station  Monitored   
 Scheduled/Valuable Personal Property: Jewelry \$  Fine Arts/Collectibles \$  Guns \$  Other (explain)

**4. If Home/Dwelling built Prior to 1960:**

Has the wiring been updated? Yes  No  New Service Panel? Yes  No  House Rewired? Yes  No  Other (explain)   
 Date/Year of Updates/Replacement: None  Plumbing  Heating  Roofing  Other (explain)

*Note: If necessary please use second page of form to provide all information requested.*



*Other Coverages and Features*

**Replacement Cost Plus**

Can pay up to an additional 20% of the Dwelling coverage limit if the home is a total loss and additional money is needed to reconstruct the home.

**Scheduled Personal Property**

Provides additional coverage for personal property of higher values such as jewelry, watches, guns, fine arts, antiques etc.

**Extended Replacement Cost on Contents/Personal Property**

Pays to replace or repair personal property without depreciation being taken from the value of the property.

**Functional Replacement Cost**

Settles losses to your home or other structures with common construction materials in place of obsolete, antique or custom materials used in the original construction. In some states applicable for home built prior to 1946.

**Identify Theft**

Pays up to \$25,000 for expenses incurred while restoring your identity and includes a service aspect to assist you with all tasks to restore your identity. Credit monitoring for early detection available by enrollment.

**Premier & Premier Extra Endorsements**

These endorsements increase internal coverage limits on items such as money, jewelry, silverware, guns, etc. and cover additional exposures on the homeowner's policy.

**Flood**

Pays as a result of a covered loss from flooding per National Flood Insurance Program (NFIP) definition of flood. Homeowners' policies exclude flood coverage. A separate deductible applies to both building and contents coverage.

**Water Backup of Sewers**

Broadens the coverage for loss due to water backup through sewers and drains.

**Earthquake**

Provides additional coverage for your home, other structures and personal property due to earthquake damage. A separate deductible applies.

**Ordinance or Law**

Pays for increased expense to rebuild due to current building codes or ordinances. Example: current zoning codes may require all new construction to have sprinkler systems.

*Available Discounts/Savings*

**Home and Car**

Up to 25% if you insure both your home and auto(s) with Insurance Services of Washington.

**Protective Device (Alarm)**

Up to 15% discount if the home has items such as: smoke detectors, fire alarms, burglar alarms, sprinklers systems, gated community, etc.

**Home Renovation**

Up to 12% for each of the following updated components: plumbing, electrical, heating, cooling, roofing. (Applies to renovations completed within the last few years)

**Home Purchase**

Up to 10% for new customers who purchased a home within 12 months prior to policy effective date.

**Age of Construction**

Up to 40% based on the age of the home.

**Single Deductible**

Only one deductible applied when more than one policy is affected by the same loss. The highest policy deductible would apply to the loss.

**Financial Stability**

Discount varies based upon payment/credit history showing financial stability/responsibility.

**Age of Insured**

Up to 20% if insured is at least 60 years old.

**Claims Free**

Up to 20% when you are claims free.

**Personal Status**

5% if insured is married or widowed.

*I understand and agree that this document is designed to help me determine the coverages that meet my individual needs. It is for informational purposes only and any insurance coverage provided will be governed by the policy and/or declaration page. This document does not amend, modify, or supersede any term of the policy and/or declaration page. ISW makes no warranties, express or implied, as to the applicability or thoroughness of the content of this document. I agree that I am responsible for reading any and all policy documents for determining whether the coverages are appropriate for my individual needs. I further understand and agree that any and all product recommendations, recommended coverages, and/or recommended limits are based on limited information I provided. Changes made on this document do not result in changes to my policy. Any policy changes must be processed through the ISW policy system. I agree that ISW will not be held liable for any losses or damages, including punitive damages, resulting from my reliance or use of this worksheet.*

Customer Name (printed): \_\_\_\_\_ Customer Signature: \_\_\_\_\_

Quotation provided by:

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**P. O Box 62**  
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