

# Renter's Policy Quote Sheet



Today's Date: \_\_\_\_\_ Start Date: \_\_\_\_\_  
Legal Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email Address: \_\_\_\_\_  
How did you hear about the agency? \_\_\_\_\_ Current Carrier: \_\_\_\_\_  
Current Premium: \_\_\_\_\_ Relationship Status:  Single  Married  Divorced  Widowed

**Consumer Reports Authorization: Do I have your permission to run a consumer report that consists of your credit score, insurance score, MVR, and clue reports to give you an accurate, bindable quote?**

**Yes**  **No**

Today's Date: \_\_\_\_\_ Home  Seasonal Home  Rental Property   
Effective Date Needed: \_\_\_\_\_ Phone: \_\_\_\_\_

### Prior Address if not resided in for the past 3 years

Street Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Current Carrier: \_\_\_\_\_ Cost of Premium: \_\_\_\_\_

### Additional Insured/Secondary Named Insured

Legal Name: \_\_\_\_\_  
DOB: \_\_\_\_\_ SSN#: \_\_\_\_\_

Dogs? \_\_\_\_\_ What Type? \_\_\_\_\_

Additional Details you would like to add \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Coverages

Personal Property \_\_\_\_\_

Liability \_\_\_\_\_

Deductible \_\_\_\_\_