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## HOMEOWNER'S INSURANCE QUOTE

Fill out the preliminary form below and an agent will contact you.

**YOUR PERSONAL INFORMATION IS PROTECTED FROM UNAUTHORIZED ACCESS, USE AND DISCLOSURE.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Who is your present home insurance company? \_\_\_\_\_

How long at present home address? \_\_\_\_\_ Number of claims in last 3 years: \_\_\_\_\_

Square footage of home (excluding garage and basement): \_\_\_\_\_

Year home was built: \_\_\_\_\_

TYPE	CONSTRUCTION	FOUNDATION	ROOF

GARAGE	BATHROOMS	OTHER FEATURES
	# of Full . # of Half	Central Air Conditioner Central Vacuum Wet Bar Whirlpool Tub Security System

FIREPLACES	BASEMENT	DECK, PORCH, PATIO
# of Chimneys	Finished Sq. Ft.	Deck Sq. Ft.
# of Hearths		Porch Sq. Ft.
		Screened Patio Sq. Ft.