## **RENTAL HOUSE QUOTE SHEET**

	Social Security:
Applicant Name	Date of Birth:
	Occupation:
	Social Security:
Spouse's Name	Date of Birth:
Year Built:	Occupation:
Predominant Style: 1 story 1 ½ story 2 story	2 ½ story 3 story Bi-Level Tri-Level
*Total Living Area: DO NOT include basements	
*include built-in garages, finished attics, room add	ditions, above garage living area, etc.
Foundation Type:	
Basement (%) Daylight Basement (yes/no) Finish	ed Basement (%) Crawl Space (%) Slab (%)
Exterior	
Exterior Wall Type: 1/% 2	/% 3/%
	o on frame/concrete, etc. Indicate type & percent of wall area.
Roofing Material: Update Year	(Asphalt shingles, wood shingles, steel, tile, etc
Attached Structures:	
Carport (count) (number of cars)	Wood Deck (square feet)
Garage (count) (number of cars)	(attached or built-in)
Porch (open/screened/enclosed)	(square feet)
Breezeway (open/screened/enclosed)	(square feet)
<u>Interior</u>	
Kitchen (count) (grade) (Builders (	Grade, Custom, Designer) Updated Year
Bath – Full (count) (grade) (Builders (	Grade, Custom, Designer) Updated Year
Half (count) (grade) (Builders (	Grade, Custom, Designer) Updated Year
Plumbing updated	
HVAC Information	
Heating Type (electric, gas, oil)	Updated Year
Air Conditioning (yes/no) Type (same/separa	ate ducts, evaporative coolers)
Ceilings/walls: Drywall% Plaster	% Other/%
Wall Coverings: Paint% Wallpape	r% Other/%
Flooring: Hardwood% Carpet	% Vinyl% Ceramic%
Other%	
Fireplace (count) Single Double Firep	place Insert (count) Wood Stove
Other Special Features	
Pool Yes No If yes, is it fenced?	_ How high is fence?
Dogs Yes No If yes, what kind?	
Trampoline Yes No	
Insurance Information: Current Carrier:	Exp. Date: Yr Purchased:
Dwelling \$	Liability \$
Contents \$	MedPay \$
Other Structures \$	Deductible \$
Loss of Use \$	
TOTA	AL INSURABLE REPLACEMENT COST \$