

Dwelling and Personal Property Exposures

Address:

_____		_____
<i>Street Address</i>		<i>Apartment/Unit #</i>

_____	_____	_____
<i>City</i>	<i>State</i>	<i>ZIP Code</i>

<i>County/Township</i>		

Please indicate the usage of this home: _____

Purchase date of home: _____

Name of Homeowners Association: _____

Are you currently Insured?

Complete the following fields if yes:

Current Carrier: _____

Expiration Date: _____

Replacement Cost Value of Dwelling: _____

Current Personal Property Limit: _____

Liability Limit: _____

Medical Payments Coverage: _____

Policy Deductible: _____

Construction of Home: _____

Number of Stories _____

Type of Home: _____

How Many Full Baths? _____ How Many Half Baths? _____

Basement? _____ Percentage of Basement Finished? _____

Roof Type: _____

Attached Garage (car spaces): _____

Porch _____ Square Footage: _____

Deck _____ Square Footage: _____

Trampoline? _____

Indicate Number of Fireplaces: _____

Woodburning Stove or Any Other Type of Supplemental Heat? _____

Heating: _____

Approximate Distance to Fire Station (in miles): _____

Approximate Distance to Hydrant (in feet): _____

Protections Systems:

Central Station Fire Alarm

Central Station Burglar Alarm

Signal Continuity

Sprinkler System

Smoke Detectors

Temperature Monitoring System

Valuable Articles

	Total Approximate Value	Separate Appraisal
Jewelry	_____	_____
Furs	_____	_____
Fine Arts	_____	_____
Silverware	_____	_____
Wine	_____	_____
Guns	_____	_____
Cameras	_____	_____
Musical Instruments	_____	_____
Other Collectibles (please describe):	_____	

Is any jewelry kept in a home safe or a bank vault? _____

Loss Information

Please list and describe in detail any losses or claims that occurred in the last 5 years for this home.

Please fax this Application back to Brunswick Companies - 330-864-8661