

First Casualty Group, Inc. - Home Checklist

This checklist is to make you more aware of the coverages you have and what the agency has to offer.

Email: _____

We communicate mainly thru e-mail, please provide.

Section 1: Primary Residence – Property Options

1. Water backup of Sewers or Drains Coverage Recommended - \$25.00 per year	Yes	No
2. Flood Insurance? Highly recommended (if eligible)	Yes	No
3. Earthquake Insurance?	Yes	No
4. Ordinance & Law Coverage? Approximately \$61.00 to increase coverage to 25% of Dwelling Coverage.	Yes	No
5. Other Structures — Increased Coverage?	Yes	No
6. Contents Special Coverage?	Yes	No
7. \$1,500 Theft of Jewelry, Furs, Watches, Precious& Semi-Precious Stones? Request Additional Coverage? If yes...you must provide an itemized schedule and for any items With values in excess of \$2,500 you must attach current appraisal.	Yes	No
8. Personal Property Special Limitations: \$200 money, Bank Notes, Bullion, Gold, Silver, etc. \$1000 Passports, Evidences of Debt, Deeds, etc. Request Additional Coverage?	Yes	No
9. Fine Arts, Guns, Camera Equipment, Golf Equipment, Computers, High Value Electronics to Schedule for Open Perils?	Yes	No
10. Any Business Conducted on Premises? Any Business Property on or away from premises?	Yes	No
11. Refrigerated Products Coverage? \$10 Per Year	Yes	No
12. Are you a member of an association?	Yes	No
Do you want to increase loss assessment coverage?	Yes	No
13. Do you have any children away at college?	Yes	No
If yes, What College? _____		
Age of Child? _____		
How Many Credit Hours? _____		

Full Time or Part Time Student? _____		
Section 2— Primary Resident — Liability Options		
1. Personal Injury Coverage? \$18 Per Year	Yes	No
2. Watercraft Liability — Any Exposure?	Yes	No
Request Coverage?	Yes	No
Request Physical Damage for the boat?	Yes	No
3. Any Incidental Farming on Residence Premises?	Yes	No
4. Any Swimming pool or Trampoline on Premises?	Yes	No
5. Any Dogs? If yes: What Type (Breed)?	Yes	No
6. Any Domestic and/or full times Resident Employees? If yes: What Type? _____ And how many? _____	Yes	No
7. Any Additional Residence Rented to Others?	Yes	No
If yes: Request Liability coverage?	Yes	No
Location of Residence _____		
8. Any Other Structures on Residence Premises Rented to Others? Request Coverage?	Yes	No
If yes: What Type of Structure and Who Rented to? _____		
9. Any Daycare in the Home?	Yes	No
10. Any Golf Carts or other Recreational Vehicles Owned?	Yes	No
If Yes: Request Liability Coverage?	Yes	No
Request Physical Damage Coverage?	Yes	No
Give Value of Item _____		
11. Any Business Activities or Business Pursuits Conducted on Premises? This Includes Teachers Liability or Corporal Punishment Coverage	Yes	No
12. Do you own any vacant land?		
If so, where? _____ Acreage? _____		
13. Identity Theft Coverage?	Yes	No

Section 3—Umbrella Coverage			
1. Are your assets vulnerable to a lawsuit? Secure your assets with excess liability limits through a personal umbrella. If Yes: Coverage Limit Available: \$1,000,000 to \$5,000,000 Indicate Amount desired: _____	Yes No		
2. Are you a notary? If yes: Request Coverage?	Yes No Yes No		
Section 4—Beach Coastal Property			
1. Any Beach Property Owned by Insured? If yes: Request Coverage?	Yes No Yes No		
Section 5—Aircraft, Hang Glider, Hot Air Balloon, etc.			
1. Does any exposure exist? If yes: What Type? _____	Yes No		
Liability or Physical Damage Requested?	Yes No		
Would you like a quotation comparison on any of the following?			
___Auto	___Boat	___Life Insurance	___Disability Income
___Medical Supplement	___Long Term Care	___Home Mortgage Protection (recommended)	___Cancer Insurance
Are you a tobacco user?		Yes No	
<p>All overages are subject to the underwriting guidelines of the individual insurance carriers and may require company underwriter approval.</p> <p>My agent has reviewed the coverages with me and the coverages I have requested to include or exclude from my policy are outlined in this Homeowner Coverage Checklist.</p> <p>I also understand that my selection/rejection of the coverages will apply to all future renewals, continuations and changes unless I notify you in writing.</p> <p>Print Name _____</p> <p>Signature _____ Date _____</p>			