

Replacement Cost Estimator Worksheet

Agency Name _____

Insured's Name: _____ Date _____

Property Address: _____ City: _____ Zip Code: _____

Building: Year Built: _____ **Updates:** Roof: _____ Heating: _____ Plumbing: _____ Electric: _____

Electrical (required for homes built before 1970): Circuit Breakers? Yes ___ No ___ Fuses? Yes ___ No ___

of Amps: (check one) under 100 ___ 100 ___ 150 ___ 200+ ___ Unknown _____

Any knob & tube wiring? Yes ___ No ___ Unknown ___

Year the electrical system was last serviced, upgraded, or repaired _____ Describe _____

Plumbing (required for homes built before 1970):

Have any plumbing fixtures been replaced since the home was originally constructed? No ___

Yes ___ Year of latest replacement _____ What was replaced? _____

Plumbing material (ex. copper, polybutylene, etc. if known) _____

Heating (required for homes built before 1970): Has the furnace been replaced since the home was originally constructed? No ___ Yes ___ Year of latest replacement _____ Year last serviced _____

of Stories _____ Type of Constr. _____ (Frame, Brick, Etc.) Total Home Sq. Ft: _____ (not including basement)

Foundation: Basement (%) _____ Basement Sq. Ft: _____ Walk Out ___ Daylight ___ Basement Finished (%) _____
Slab (%) _____ Crawlspace (%) _____ Foundation Material (_____)

Exterior Walls: 1. _____ / _____ % 2. _____ / _____ % 3. _____ / _____ %

Examples (Wood, Vinyl, Brick, Brick Veneer, Stucco on Frame etc.)

Roofing: Material: _____ Examples: (Architectural, 3 Tab, Clay, Wood Shake, Metal) Solar Panels _____

Garage (count): _____ Number of cars _____ Type (check one): Attached: ___ Built-in: ___ Detached: ___

Porches/Decks: Porch (Sq. ft.) _____ Deck (Sq. ft.) _____ (check one) Open: ___ Enclosed: ___ Covered: ___

Exterior Features (count): Bay Windows ___ Picture Windows ___ Skylights ___ Sliding Door ___ French Door ___
Hot Tub ___ Pool ___ Other _____

Additional Detached Structures: _____

Kitchens: Kitchens (count): Builders Grade _____ Semi-Custom _____ Custom _____ Designer _____

Bathrooms: Bathrooms (count): Full: Builders Grade _____ Semi-Custom _____ Custom _____ Designer _____

3/4: Builders Grade _____ Semi-Custom _____ Custom _____ Designer _____

1/2: Builders Grade _____ Semi-Custom _____ Custom _____ Designer _____

Interior: Wall Material: Drywall (%) _____ Plaster (%) _____ Other (%) _____

Wall Finish: Paint (%) _____ Wallpaper (%) _____ Other (%) _____

Flooring: Carpet (%) _____ Hardwood (%) _____ Vinyl (%) _____ Ceramic Tile (%) _____ Laminate (%) _____

Other (%) _____

Heating: Heating System – Gas: _____ Electrical: _____ Baseboard (no central heating system) _____

Cooling: A/C _____ (check one) Same Ducts as Heat: ___ Separate Duct: ___ Swap Cooler: _____

Interior Features: Alarm System ___ (Central: ___ Local: ___) Interior Sprinklers ___ Intercom ___ Built Ins ___

Jacuzzi ___ Wet Bar ___ Central Vacuum ___ Home Theater ___ Indoor Pool _____

Fireplaces: Fireplace (count) _____ Gas: ___ Wood: ___ Chimneys (count) _____ Wood burning Stove _____

Other Special Features: _____