

HOMEOWNERS/LANDLORD INSURANCE QUESTIONNAIRE

Guarino Insurance Agency

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Primary Insured:	Home Phone:
Address:	Alt Phone (cell or work):
	Email Address:
	Occupation:
Birth Date:	# of years in occupation:
Current Home Insurance Co:	Renewal Date:

Date of purchase _____

Prior Address (if under 1 year) _____

How long at prior address? _____

If this is a home purchase

Escrow Close Date (approx) _____

Will the current owner will be renting back? Y or N If yes, for how long? _____

Household Members	Relationship	Birth Date	Gender	Occupation	# of years in occupation	Social Security #

Townhouse or Condo? Y or N if yes, please stop and go to condo/townhouse questionnaire

Occupancy (primary residence, seasonal, secondary residence, rental) _____ If a rental, how much do you collect in rents each year? _____

Any claims in the last 3 years: Y or N If yes, please outline briefly below the date of the loss, the type of loss (vandalism, theft, etc) and the amount of payout for each loss.

Circle one: Single family home Duplex Triplex Fourplex

Circle one: Inside city limits Outside city limits

Year Built: _____ Square Feet: _____ Deductible(s) you would like to have quoted _____

If renovations to plumbing, heating, and/or electrical, please provide year renovation(s) were completed:

Plumbing _____ Heating _____ Electrical _____

Roof Type: _____ (If tile, Spanish, or concrete) if shingle – please specify (wood, asphalt = composition, ...). _____ Roof Age (in years): _____

How many stories ____ Style (Victorian, Ranch, Bi-level, Bungalow, etc) _____

Foundation: Slab or Crawl Space (circle one) Is the home bolted or tied down to the foundation? Y or N

Is the foundation: Square (4 corners), Rectangle (4-6 corners), Irregular (7-11 corners), Very irregular (> 11 corners)? _____

Garage Circle one: None Attached Detached
1 car 2 car or more. If more, how many _____

Swimming pool: Y or N If Y, fenced pool enclosure? Y or N Deck Y or N, If yes, size (in square feet) _____

Interior walls: drywall/sheetrock or plaster or plaster w/horsehair

Cathedral Ceiling Y or N If yes, what percentage _____

Current Market Value: _____

Kitchen Grade: Standard or Custom or Luxury

Basement Y or N If yes, square feet of basement area _____ and if it's finished, what percentage is finished? _____ (if unfinished, the percentage should be 0%)

Laundry Room Y or N, if yes which floor is it located on? _____

Exterior Walls (provide percentages, needs to equal 100%): Aluminum Siding _____ Asbestos Shingles _____ Cement Shingles _____ Clapboard _____ Redwood Clapboard _____ Stucco _____ Wood Shakes _____ Wood Siding _____ Brick Veneer _____ Stone Veneer _____ Stucco on Masonry _____ Vinyl Siding _____ Steel Siding _____ Adobe _____ Log Veneer Siding _____

Interior Walls (provide percentages, needs to equal 100%): Bookcase Walls _____ Brick Facing _____ Ceramic Tile _____ Foil Wallpaper _____ Grass Cloth Paper _____ Imported Ceramic Tile _____ Marble _____ Mirrors _____ Paint _____ Sheet Paneling _____ Solid Wood Paneling _____ Vinyl Wallpaper _____ Paint (faux) _____

Flooring (provide percentages, needs to equal 100%): Brick _____ Carpet (Std) _____ Carpet (Custom) _____ Carpet Over Hardwood _____ Ceramic Tile _____ Custom Carpet Over Hardwood _____ Hardwood _____ Imported Ceramic Tile _____ Laminated _____ Marble _____ Parquet _____ Slate _____ Stone _____ Vinyl _____ Concrete Stamped/Textured _____

Number of **Full** Bathrooms Standard _____ Custom _____ Luxury _____

Number of **Half** (no bathtub or shower) bathrooms _____

Wall Height-Circle one 8ft.(Std.) 9ft. 10ft.

Please select provide quantity of additional features that are applicable:

Additional Furnace	Greenhouse	Porch Screened
Attached Carport	Hot Tub	Redwood Deck
Breezeway Open	Intercom	Solar Room
Breezeway Screened	Jacuzzi	Wood Deck
Composite Deck	Metal Spiral Staircase	Wood Spiral Staircase
Central Stereo System	Patio Cover	
Central Vacuum	Porch Open	

Atrium Doors	Skylights
Atrium Windows	Sliding Glass Doors
Bay Windows	Solar Panels
Exterior Shutters	Stained Glass Windows
French Doors	Wet Bar
Greenhouse Windows	
Picture Windows	

Plumbing: All Copper? Y or N. If N, what kind of plumbing? _____

Oldest section of plumbing (in years): _____

Fireplace/s Y or N How many _____ Chimney(s) (circle one) Masonry or Metal

Heating/Cooling-Circle one heat & air-conditioning or heat only Balcony Y or N

Type of Heating System (i.e. forced air, thermostat, gas or electric) _____

Secondary Heating System Y or N, if yes. System Type (wood stove...)_____

Electrical- Circuit Breakers: Y or N AMP capacity of electrical panel _____

Water heater anchored Y or N

Distance to Fire Hydrant (feet): _____ Distance to Fire Station (miles): _____

Un-cleared brush within 200 ft. of house Y or N

Pets: Do you own a dog?_____ If so, what is the breed of the dog?_____ Any bite history?_____

Do you want/need an earthquake insurance quote? Y or N If yes, is house on a slope Y or N, If yes, % of grade (approx.)_____

Do you want/need flood insurance quote? Y or N, if yes, flood zone #_____ Some flood zones require an elevation certificate, if needed do you have one?

Homeowners policies have limitations on certain property such as computers and jewelry. Please ask if you have questions about specific limits or items to be covered.

Other insurance needs (auto, life, health or disability or long term care) If so, please list here.

If home was built prior to 1950: Please fill out questions below:

Operational Knob & Tube Wiring Y or N

Fuses in the electrical system Y or N

Age of furnace_____

Discount & Safety Questions:

Any Smokers in household Y or N

Dead Bolt Locks on ALL doors leading to Exterior Y or N

Fire Extinguisher Y or N

Smoke Detectors Y or N

Burglar Alarm Y or N, Monitored Y or N

Automatic gas shutoff valve? Y or N

Is the energy source all electric? Y or N

Is the energy source all solar? Y or N

Interior Fire Sprinklers Y or N, if yes, in all rooms including baths & closets Y or N

When complete, please either scan&email back or fax to 408-692-1442. Please call 408-248-0909 with questions.