

## New Condo Unit Worksheet

### Basic Info

Name \_\_\_\_\_ Address \_\_\_\_\_  
Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
Effective Date \_\_\_\_\_ Year of Construction \_\_\_\_\_ # of Units in Building \_\_\_\_\_  
Frame/Masonry \_\_\_\_\_ # Firewalls \_\_\_\_\_ Owner Occupied \_\_\_\_\_  
Claims in last 3 years (describe) \_\_\_\_\_  
Pets (describe) \_\_\_\_\_ Business Use (describe) \_\_\_\_\_  
Storage area other than in unit or Self-Storage Facility \_\_\_\_\_  
Woodstove \_\_\_\_\_ Contents Amount \_\_\_\_\_  
Dwelling Amount (by-laws needed) \_\_\_\_\_ Square footage of Unit \_\_\_\_\_  
Who writes the Master policy? \_\_\_\_\_ Master Deductible \_\_\_\_\_  
Contents amount \_\_\_\_\_

### Credits (check all that apply)

Non-smoker Credit \_\_\_\_\_ Smoke Detectors \_\_\_\_\_ Fire Extinguishers \_\_\_\_\_ Deadbolts \_\_\_\_\_  
Central Burglar Alarm \_\_\_\_\_ Central Fire Alarm \_\_\_\_\_ Account Credit \_\_\_\_\_  
Mature Homeowner Credit (age 55+) \_\_\_\_\_

### Optional Coverages (indicate whether coverages should be included, not included, and any comments)

Valuable Items (Jewelry, Silver, Etc.) \_\_\_\_\_

Earthquake \_\_\_\_\_

Water or Sump Pump Back-up \_\_\_\_\_

Increased Loss of Use \_\_\_\_\_

Umbrella Liability Coverage (must be approved by the company) \_\_\_\_\_

Other \_\_\_\_\_  
\_\_\_\_\_

Completed By \_\_\_\_\_ Date \_\_\_\_\_