



## **Condominium Quote Questionnaire**

### About You:

| Name of person(s) owning home (on deed):         |                   |                    |        |  |
|--|-------------------|--------------------|--------|--|
| Your date(s) of birth:                           |                   |                    |        |  |
| Your occupation(s) (discounts may apply):        |                   |                    |        |  |
| Your mailing address:                            |                   |                    |        |  |
| Address of home: (if different than mailing)     |                   |                    |        |  |
| E-Mail:  | Phone #           | t:                 |        |  |
| Other than the persons listed above, how many    | other people live | e with you?        |        |  |
| How are they related to you?                     |                   |                    |        |  |
| Do you or any of the people mentioned above sr   | noke?             |                    |        |  |
| How would you like to receive your quote:        |                   |                    |        |  |
| How did you hear about Stanhope Simpson?         |                   |                    |        |  |
| Your Insurance History:                          |                   |                    |        |  |
| Current Insurance Company:                       | _ Renewal Date    | •                  |        |  |
| How long have you been with your current comp    | bany?             | Years              | 5      |  |
| How long have you been continuously insured?     |                   | Years              | 5      |  |
| What year did you move into your home?           |                   |                    |        |  |
| Have you had any claims in the past five years?  |                   |                    |        |  |
| If you answered "YES" to the above question, wh  | nat happened?     |                    |        |  |
| Has any of your property policies been cancelled | for non-payme     | nt in the past six | years? |  |
| If "YES" how long ago?                           | _                 |                    |        |  |
|  |                   |                    |        |  |
| Your Condo:                                      |                   |                    |        |  |

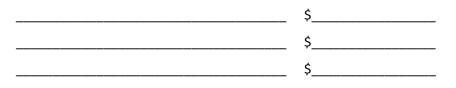
| yrs mths |
|----------|
| \$       |
|          |
|          |
|          |
|          |

| How is the condo/building constructed (wood frame, brick, concrete, etc.)?       |     |
|--|-----|
| If it is an apartment style, describe the building (# of storeys, # of units).   |     |
| If it is an apartment style, do you have basement storage?                       |     |
| If it is an apartment style, are there any stores or businesses in the building? |     |
| How many bathrooms?  |     |
| What is the value of upgrades from the original condo unit if known?             | \$  |
| Is there a fire hydrant within 300m?   |     |
| How far is the fire station if you know?   | kms |
| Do you have a monitored burglary and fire alarm?                                 |     |
| How is your condo heated?  |     |
| Are there any additional heat sources (woodstove, fireplace, propane)?           |     |
| Was the additional heat source installed by a professional?                      |     |
| Do you have a hot water tank (if "YES" please provide age)                       | yrs |
| If a townhouse condo, how old are the shingles on your roof?                     | yrs |
| What are the shingles made of?   |     |
| What type of wiring is in the condo (copper, aluminum, other)?                   |     |
| Are there breakers or fuses?   |     |
| What is the electrical amperage on the panel?                                    |     |
| Has the wiring or panel been updated? If so, when?                               |     |
| What type of plumbing is in the condo (copper, PVC, Pex, Kitec, etc.)?           |     |
| Has the plumbing/pipes been updated? If so, when?                                |     |
| Do you run a business from your house?   |     |
| If you answered "YES" to the above question, please describe:                    |     |

#### Your Additional Coverage Needs:

Do you have any special items of high value?

If you answered "YES" to the above question, what are the items and the approximate value:



Describe any additional or special coverage requirements:

#### The Fine Print:

In conjunction with the coverages noted above, additional coverage extensions may also be available to enhance your protection. Your personal insurance professional at Stanhope Simpson will discuss available options with you when reviewing your quotation.

The applicant acknowledges: (1) all of the information provided on this form is true to the best of my knowledge as each question's answer may impact premium calculation; and (2) reports containing personal, credit, factual, investigative, insurance, or driver information may be sought in connection with the preparation of the insurance quote I am hereby requesting.

# Thank you for considering Stanhope Simpson. We are proud to be a local, independent insurance broker!