

Spearhead Insurance Group – Property Information Request

Full Name: _____ DOB: _____ SSN: _____ Primary Phone: _____

Additional Insured: _____ DOB: _____ SSN: _____ Alternate Phone: _____

Mailing Address: _____ Referred by: _____

Who is the Property Deeded To? Entity Name? _____ Email: _____

<p>Is the property a current home or a new purchase?</p> <p>What type of policy are you interested in?</p> <p>What are your plans for the property?</p> <p>What type of residence is this?</p> <p>Are there any walls attached to the property?</p> <p>If the property is a townhome or condo, please answer below:</p> <ol style="list-style-type: none"> 1) Does your HOA include a master insurance policy? 2) If yes, does the master policy cover the studs out? 3) Do walls attach to other homes? 4) Are walls separated by firewalls? 5) How many townhouses are connected in a row? 	<p><u>Do you currently own this property?</u></p> <p>If yes, please answer the questions below:</p> <p>Policy Exp Date: _____ Property Is: _____</p> <p>Carrier Name: _____ Do you have Flood Insurance: _____</p> <p>Lender Name: _____ Does Lender Escrow: _____</p> <p>Purchase Date: _____</p> <p>Any prior claim(s)? _____ Date of Loss(es): _____</p> <p>Type of Loss(es): _____</p> <p><u>Is property a new purchase?</u> Closing Date: _____</p> <p>If yes, do you have an Accepted Contract?</p> <p>Short Sale: _____ Inspection: _____ Appraisal: _____</p> <p>Do you have final rehab estimates:</p> <p>Length of Time to Renovate & Find A Tenant: _____</p> <p>Length of Rehab: _____ Final Rehab Estimate:\$ _____</p> <p>Rehab Description: _____</p> <p>Exterior Rehab Description: _____</p> <p>Rebuild Cost Excluding Land Value: _____</p> <p>If total loss, amt you prefer: \$ _____ Loan Amount: \$ _____</p> <p>Cash Purchase: _____ Lender: _____ Escrowing: _____</p>	
<p><i>Notes:</i></p> 		
<p align="center"><i>Office Use Only</i></p> <p>MSB: _____</p> <p>MAJORITY EXT: _____</p> <p>PPC: _____</p>	<p align="center"><i>Office Use Only</i></p> <p>Flood Zone: _____</p> <p>Flood Rate: _____</p>	<p align="center"><i>Office Use Only</i></p> <p>TDP3: _____</p> <p>TDP1: _____</p>

Property Address: _____ County: _____ Year Built: _____

Sq. Ft: _____ Stories: _____ Bed(s): _____ Bath(s): _____ Conservative Roof Year: _____ Roof Type: _____ Roof Pitch: _____

Exterior Construction: *Front* _____ *Back* _____ *Left Side* _____ *Right Side* _____ Central Alarm: _____

Garage Size: _____ Garage Type: _____ Smokers in Home: _____ Security Bars: _____ If Yes, are Security Bars Quick Release? _____

Foundation Type: _____ If pier & beam foundation, is the crawl space enclosed? _____ Trampoline: _____

Pool: _____ InGround: _____ Is Yard Fenced? _____ Features: _____ Dogs: _____ Breeds: _____

Properties 30+ years: Overall condition of the home: _____ Historic Home: _____ Historic District: _____

Water Heater Update Year: _____ A/C & Heat Update Year: _____ Type of AC & Heat: _____

Wiring Update Year: _____ Extent of Wiring Update: _____ Wiring Type: _____ If Aluminum, is it pigtailed? _____

Brand of Electrical Panel: _____ Does home have GFCI outlets in wet areas? _____

Plumbing Update Year: _____ Extent of Plumbing Update: _____ Plumbing Type: _____