



# Home & Contents Insurance Quotation Form

Client Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_ State: \_\_\_\_\_ DOB: \_\_\_\_\_ Male / Female

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

Claims in the last 5 years/Insurance declined/special condition/ Criminal Offences: Yes / No

If yes Details \_\_\_\_\_

## Cover Details

Situation address: \_\_\_\_\_

Construction: \_\_\_\_\_ Age: \_\_\_\_\_ Rewired/Replumbed in last 10 years: Yes / No

Roof: Tile/ Iron or Steel/ Wood/ Concrete/ Fibro/ other: \_\_\_\_\_

Heritage Listed: Yes/ No Unoccupied for more than 60 days: Yes/ No \_\_\_\_\_

Is the Home: Owner Occupied / Tenanted / Holiday Home

## Sum Insured:

Building \$ \_\_\_\_\_

Contents \$ \_\_\_\_\_

Specified Valuables:

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Specified Contents:

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**Cover:** Listed Events / Accidental Damage

**Excess:** \$Nil / \$100 / \$250 / \$500 / \$1000

Security:

Deadlocks: Yes / No Windowlocks: Yes / No Alarm: Yes / No Type: Local / Monitored

Mortgagee: Yes / No If Yes Name: \_\_\_\_\_

Any business activities from home: \_\_\_\_\_

Any Additional Information: \_\_\_\_\_