

Amity Insurance Agency, Inc. - Mobile Home Quote Form

Insured Information

Customer Name: _____

Address: _____

County: _____

Phone Number: _____

DOB: _____ SS#: _____

Spouse Name (if applicable): _____

DOB: _____ SS#: _____

Previous address (if insured has moved within the last 60 days):

Property claims in the last 5 years (if applicable): _____

Mobile Home Information

Usage: _____

Type: _____

Year: _____ Make: _____ Model: _____

Serial #: _____

Width: _____ Length: _____

Total # of occupants: _____

Park name (if in mobile home park): _____

Roofing Material: _____

Year of roof replacement (if not original): _____

Siding Material: _____

Year of siding replacement (if not original): _____

Utilities

Number of heat sources: _____

Central heating: _____

Auxiliary Heat Source: _____

Fully connected to utilities: _____

Financial information

Purchase Price: \$ _____ Approx. closing date: _____

Additional Personal Property Coverage (if any): \$ _____
(Standard percentage is 50% of dwelling coverage)

Additional Personal Liability Coverage (if any): \$ _____
(Standard coverage is \$25,000)

Any additional adult household member to be insured (besides spouse)?:

Name/DOB: _____

Name/DOB: _____

Leinholder name/address: _____

Paying in full?: Y N Future renewal bills sent to lein?: Y N

Requester Information:

Email quote/application to: _____

Contact name/phone # : _____

Additional Information :

Thank you for your interesting in our agency!

Please contact Steve Newman @ Amity Insurance Agency, Inc. with any questions, concerns, or requests.
513-793-9191 phone
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Amityins1@aol.com