



Home & Renters Application

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Agent ID#: _____ Branch ID#: _____

Home Renters Condo Townhouse Other: _____

Insured Information: _____

Name: _____ SSN#: _____

DOB: _____ Contact #: _____

Dwelling Information: _____

Address or Property: _____

Year Built: _____ Market Value \$: _____

Personal Property Value \$: _____ Construction Type: _____

Roof Type: _____ Year roof updated: _____

Total SqFt of Home: _____ # of Bedrooms & Baths: _____

Garage (Y or N) if yes list type: _____ # of Story/Levels: _____

Alarm System: (Y or N) Fire Alarm: (Y or N) Primary Source of Heat: _____

Distant to Fire Station: _____ Distant to Fire Hydrant: _____

Currently Insured: (Y or N) if yes Carrier: _____ Premium Amount: _____

Do you need General Liability Coverage (Y or N) if yes limits desired: 50,000 100,000

300,000 Other: _____ Do you have you have any claims? (Y or N) if yes

How many claims? # _____ and value of each claim \$: _____ / _____ / _____ / _____

Comments: