

Condo Questionnaire	
Name:	(Include spouse)
Date of Birth:	(Include spouse)
Phone Number:	
Email Address or other contact:	
Location Address (Please also list mailing address if different):	(If you've lived at this address less than 5 years, please list prior address also)
Property Info:	
Year of construction:	
Style of home (1 story, 2 story, etc):	
Above ground square footage:	
Below ground construction:	Basement/Slab/Crawl: If basement, % finished:
Exterior construction:	
# of baths:	# of full & # of 1/2:
Central Air:	Yes/No:
Fireplace:	Yes/No, Gas/Wood/Wood Stove:
Flooring: % of each type:	
Age & type of heating:	
Age & type of electric:	Circuit Breakers/Fuses:
Security or Sprinkler System:	If yes, what?
Repairs Needed:	
Please list type & value of <u>Additions</u> & <u>Alterations</u> to the <u>original</u> construction:	
Current Insurance Info:	
Current coverages:	Include company, effective date, coverages, deductible & endorsements:
Additional Info:	
According to your bi-laws, what part of your unit are you responsible to carry coverage on (other than your contents)?	
Dwelling Coverage Desired:	
Personal Property Coverage Desired:	Value to replace ALL contents with NEW ones:
Contents that you are specifically concerned about replacing:	(ie Jewelry, Guns, antiques, artwork, etc) List type & Value:
Purchase date:	
# of consecutive years you've carried a homeowner-type policy?	(including home, condo, mobile home & tenant)
Property Claims in the last <u>5 years</u>:	List when & what:
Smoker/Non-Smoker:	(all residents)
Bankruptcy in the last 5 years?	If yes, when?
Is there a pool, hot tub or trampoline on your property?	If yes, what?
Do you have any pets?	If yes, what breed?
Business conducted in your home?	If yes, what?
Deductible options you would consider:	
Do you have any toys?	(ie boat, motorcycle, atv, snowmobile, golf cart, RV, etc)
Date Questionnaire Completed: _____ Completed By: _____	
If you have a copy of your curent "Declaration Page", please forward that to us as proof of prior coverage and to use for comparison purposes.	
Submission of information for a quote in no way binds coverage. Personal information will be used solely for underwriting purposes. Submission of information gives the Gary J Bach Agency permission to run all reports necessary to quote accurate insurance premiums.	
Please return this form to Gary J Bach Agency 1107 N Blackhawk Blvd Ste A Rockton, IL 61072	
Fax: 815-624-0673 Email: GJB@BachInsurance.com or Call: 815-624-0663	

Please tell us how you heard about our office: