

Personal Insurance Questionnaire



Wisconsin **Medical** Society
Insurance & Financial Services, Inc.



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To ensure a more accurate quote, please send a copy of your insurance policy's declarations page and/or fine arts schedule along with the following information:

Name _____ Address _____

City _____ ZIP _____ County _____

Telephone _____ Cell/Pager _____

E-mail Address _____

Best time to call? _____

Home

Year Built _____ Dwelling Replacement Cost \$ _____ Total Living Area Square Feet _____

Construction? BRICK FRAME OTHER _____

Fireplaces? NONE MASONRY PREFAB INSERT

Auxiliary Heating? NONE WOODSTOVE WOOD/COAL FURNACE SOLAR

Roof Type? ASPHALT CLAY TILE/SLATE WOOD SHAKES WOOD SHINGLES

Burglar Alarm: LOCAL CENTRAL

Fire Alarm: LOCAL CENTRAL Sprinkler Systems: PARTIAL FULL

Responding Fire Department? _____ Miles to Fire Department? _____

Feet to Fire hydrant? UNDER 1,000 FT. OVER 1,000 FT.

Property greater than one acre? YES NO If YES, how many acres? _____

Please check if any outbuildings are on the premises: SHED BARN OTHER _____

Any dogs? YES NO If YES, what breed(s)? _____

Deductible? \$500 \$1,000 \$2,500 \$5,000 Would you like earthquake coverage? YES NO

Is there a 2nd home? YES NO If yes, please provide equivalent information on attached sheet.

Do you own any homes or apartment buildings rented to others? YES NO If YES, please describe...

Any losses within the last 3 years? YES NO If YES, date of loss(es) & description(s)?

Do you have a swimming pool? YES NO If YES, with Slide Diving Board 6 ft. Privacy Fence

Do you have a trampoline? YES NO

Do you belong to a Homeowner's Association? YES NO

Is there an office/business on the premises? YES NO If YES, please describe _____

Umbrella

What umbrella limit would you like? \$1M \$2M \$3M \$4M \$5M

Vehicle #1

Year _____ Make _____ Model _____ Titled To? _____

VIN: _____ Annual Miles Driven? _____

Standard Use (Mileage is to Work One Way)?

0-3 Mile Commute/Pleasure 3-14 Mile Commute 15+ Mile Commute Farm

Driver's Name? _____ Social Security Number*: _____ - _____ - _____

Date of Birth? _____ - _____ - _____ WI License Number*: _____ - _____ - _____
Month Day Year

Sex? Female Male Marital Status? Single Married Separated Divorced Widowed

Occupation: _____

Is Driver a Primary or Occasional Driver on this vehicle? PRIMARY OCCASIONAL

Is Driver a Student under 21 years old maintaining a B Average? YES NO

Is Driver a Student away at school over 100 miles from home without a car? YES NO

Vehicle #2

Year _____ Make _____ Model _____ Titled To? _____

VIN: _____ Annual Miles Driven? _____

Standard Use (Mileage is to Work One Way)?

0-3 Mile Commute/Pleasure 3-14 Mile Commute 15+ Mile Commute Farm

Driver's Name? _____ Social Security Number*: _____ - _____ - _____

Date of Birth? _____ - _____ - _____ WI License Number*: _____ - _____ - _____
Month Day Year

Sex? Female Male Marital Status? Single Married Separated Divorced Widowed

Occupation: _____

Is Driver a Primary or Occasional Driver on this vehicle? PRIMARY OCCASIONAL

Is Driver a Student under 21 years old maintaining a B Average? YES NO

Is Driver a Student away at school over 100 miles from home without a car? YES NO

Vehicle #3

Year _____ Make _____ Model _____ Titled To? _____

VIN: _____ Annual Miles Driven? _____

Standard Use (Mileage is to Work One Way)?

0-3 Mile Commute/Pleasure 3-14 Mile Commute 15+ Mile Commute Farm

Driver's Name? _____ Social Security Number*: _____ - _____ - _____

Date of Birth? _____ - _____ - _____ WI License Number*: _____ - _____ - _____
Month Day Year

Sex? Female Male Marital Status? Single Married Separated Divorced Widowed

Occupation: _____

Is Driver a Primary or Occasional Driver on this vehicle? PRIMARY OCCASIONAL

Is Driver a Student under 21 years old maintaining a B Average? YES NO

Is Driver a Student away at school over 100 miles from home without a car? YES NO

Vehicle #4

Year _____ Make _____ Model _____ Titled To? _____

VIN: _____ Annual Miles Driven? _____

Standard Use (Mileage is to Work One Way)?

0-3 Mile Commute/Pleasure 3-14 Mile Commute 15+ Mile Commute Farm

Driver's Name? _____ Social Security Number*: _____ - _____ - _____

Date of Birth? _____ - _____ - _____ WI License Number*: _____ - _____ - _____
Month Day Year

Sex? Female Male Marital Status? Single Married Separated Divorced Widowed

Occupation: _____

Is Driver a Primary or Occasional Driver on this vehicle? PRIMARY OCCASIONAL

Is Driver a Student under 21 years old maintaining a B Average? YES NO

Is Driver a Student away at school over 100 miles from home without a car? YES NO

Are all vehicles garaged at primary residence? YES NO If NO, please explain: _____

** We consistently collect information such as loss reports, motor vehicle reports and credit reports from insurance support organizations. A consumer report of your credit history will be ordered for use in determining an insurance score. The insurance score will be used in order to provide a quotation. This inquiry will not affect your credit history in any way.*

Miscellaneous

Do you own children's motorized vehicles (such as Barbie Jeep, Hummer H2 or Scooters)? YES NO

Do you have scheduled personal property (furs, fine arts, jewelry, etc...)? If so, please provide a description & value for each.

Do you have any recreational vehicles? If so, please provide year, make, model, # of cc's and Horse Power for each.

Do you have a boat? YES NO

Year of Boat? _____ Length _____ Make _____ Model _____ Value _____

Year of Motor? _____ Horse Power? _____ Miles/Hour? _____ Inboard or Outboard? _____ Value? _____

Year of Trailer _____ Make _____ Model _____ Value _____ Deductible _____

Current Insurance Information

Name of Company

Policy Number

Expiration Date

Home

Auto

Umbrella