



**Sierra Insurance Associates, Inc.**  
Truckee Tahoe Insurance Services  
40200 Truckee Airport Rd, #3 Truckee, CA 96161  
(530) 550 - 0123

## HOMEOWNERS, CONDO OR RENTERS INSURANCE QUOTE FORM

Thank you for your interest in Homeowners Insurance from Sierra Insurance Associates!

Attached is your convenient "Request for Quote" form. If you would like to receive a homeowners, condo or renters insurance quote from Sierra Insurance, simply complete all requested information on the form and return it to us:

**Fax: 530-550-0102 or Email: [home@sierrainsurance.com](mailto:home@sierrainsurance.com)**

For the most accurate quote, **please fully complete all requested information**. If you qualify, we'll send you a no-obligation quote to compare with your current coverage and premium.

### General Information

Name on Grant Deed: \_\_\_\_\_

Your First Name: \_\_\_\_\_ M.I. \_\_\_\_ Last Name: \_\_\_\_\_  
Your Spouse/Partner Name: \_\_\_\_\_ M.I. \_\_\_\_ Last Name: \_\_\_\_\_  
Your Date of Birth: \_\_\_\_\_ Spouse/Partner Date of Birth: \_\_\_\_\_  
Your Gender: \_\_\_\_\_ Spouse/Partner Gender: \_\_\_\_  
Marital Status \_\_\_\_\_ Your Occupation: \_\_\_\_\_  
Mailing/Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_  
Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Date Coverage is to begin: \_\_\_\_\_ Current Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

### Location Information For Insurance Coverage

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_

Is this your primary residence? Yes \_\_\_ No \_\_\_ Seasonal or secondary use only? Yes \_\_\_ No \_\_\_  
Is this residence rented to others? Yes \_\_\_ No \_\_\_ Short term/Vacation(Vrbo etc.)? Yes \_\_\_ No \_\_\_  
Is this property a condo? Yes \_\_\_ No \_\_\_ Is this property a duplex, 4-plex, or townhouse? Yes \_\_\_ No \_\_\_  
Any business conducted on premises? Yes \_\_\_ No \_\_\_ If Yes, please explain: \_\_\_\_\_

Do you have a Mortgage? Yes \_\_\_ No \_\_\_ Name of Lender: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_  
Loan #: \_\_\_\_\_

Miles to responding fire station: \_\_\_\_\_ Distance to Fire Hydrant: \_\_\_\_\_ feet. If Over 1000 feet, estimate distance: \_\_\_\_  
Fire Department Name: \_\_\_\_\_

Are you in a FIRE WISE COMMUNITY? Yes \_\_\_ No \_\_\_ Name: \_\_\_\_\_

Is your residence in a 50+ age community governed by a management group? Yes \_\_\_ No \_\_\_  
Is this a new purchase: Yes \_\_\_ No \_\_\_ Is the home currently for sale by you: Yes \_\_\_ No \_\_\_  
Is this property vacant: Yes \_\_\_ No \_\_\_  
How many families occupy this dwelling? \_\_\_\_

## Dwelling Information Details

Your estimated replacement cost to rebuild: \$ \_\_\_\_\_ (Note we recommend \$400/sqft)  
Total est. value of your personal property & contents: \$ \_\_\_\_\_  
Personal liability desired? \$ \_\_\_\_\_ (\$500,000 typical)  
Deductible desired: \$ \_\_\_\_\_ (\$2,500 best pricing)

Total livable square feet: \_\_\_\_\_ Year Built: \_\_\_\_\_ # of stories: \_\_\_\_\_

Any active construction on property? Yes \_\_\_ No \_\_\_ Describe: \_\_\_\_\_

Foundation type: Slab \_\_\_\_\_ Crawlspace \_\_\_\_\_ Pier&Post \_\_\_\_\_ Basement \_\_\_\_\_ Square Feet \_\_\_\_\_ %Finished \_\_\_\_\_

**Fire Mitigation**..... Cleared distance from home outward: \_\_\_\_\_

Propane tank: Yes \_\_\_ No \_\_\_ Roof gutters: \_\_\_\_\_ Gutter Guards: Yes \_\_\_ No \_\_\_

Swimming pool: Yes \_\_\_ No \_\_\_ Trampoline: \_\_\_\_\_

If Dwelling Unoccupied, how many consecutive days: \_\_\_\_\_

Construction Exterior (ex. redwood, cedar, stucco, masonry, log) \_\_\_\_\_

Year Roof was updated, new or replaced: \_\_\_\_\_ (\*\*important do not leave blank). Roof Cover: \_\_\_\_\_

Primary Heat Gas/Elec/Wood: \_\_\_\_\_ Secondary Heat Type: \_\_\_\_\_ Year Heating System last updated: \_\_\_\_\_

# Fireplaces: \_\_\_\_\_ # of Wood Stoves: \_\_\_\_\_ If wood stove, annually cleaned? Yes \_\_\_ No \_\_\_

Burglar Alarm: Yes \_\_\_ No \_\_\_ Monitoring Company Name: \_\_\_\_\_ \

Fire Alarm: Yes \_\_\_ No \_\_\_ Monitoring Company Name: \_\_\_\_\_

Temperature Monitoring? \_\_\_\_\_ Automatic Water Shut off ? \_\_\_\_\_ Automatic Seismic Gas Shut off? \_\_\_\_\_

Garages: None \_\_\_ 1-car \_\_\_ 2-car \_\_\_ 3-car \_\_\_ Detached? Yes \_\_\_ No \_\_\_ Sqft: \_\_\_\_\_

Other Detached Buildings? Yes \_\_\_ No \_\_\_ If Yes, Describe: \_\_\_\_\_ Sqft: \_\_\_\_\_

Do you have a caretaker? Yes \_\_\_ No \_\_\_ Name of Company: \_\_\_\_\_

## Claims Information

Please list any/all claims for the last five years. Designate if still open or closed and amount:

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## Additional Information

Do you have any dogs? If YES, # of: \_\_\_\_\_, Breed: \_\_\_\_\_. Any instances of dog bites in the past? Yes \_\_\_ No \_\_\_

If YES, please describe: \_\_\_\_\_

Do you desire or required to have either EARTHQUAKE or FLOOD coverage? Yes \_\_\_ No \_\_\_

Combining a primary home policy with an auto can generate 10-20% savings, are you interested in savings? Yes \_\_\_ No \_\_\_

Adding a personal umbrella with extra limits of \$1,000,000 can be very inexpensive, are you interested? Yes \_\_\_ No \_\_\_

**By signing below, you acknowledge you've completed this form to the best of your ability and knowledge. Sierra Insurance uses this data to provide coverage options given underwriting requirements. Please sign below acknowledging:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*SAVE form to desktop, then attach to email and send to home@sierrainsurance.com