

Annual Home and Auto Insurance Review - Basic Information

Just as your health needs an annual checkup, so does your home and auto insurance coverage. Please take a few minutes of your time to complete your **Annual Review**. When you are finished, please **RETURN FREE!** We have enclosed a business reply postage-paid envelope for your convenience, OR you can:

- **Call 609-693-3123** to review over the phone
- **Fax to 609-693-4935**
- **Email jennifer@hauswirth.net**

Form completed by _____ Signature _____

Email _____ Date _____

Best contact number & day/time to be reached _____

If you would rather be contacted by email, please write "email" above.

This simple review can help to prevent claim problems. Thank you for your time and cooperation! We appreciate your business and hope that you tell your friends and neighbors about our agency!

Homeowner Annual Review

- Do you wish to insure valuable jewelry or furs?
 No Yes >> *Please list* _____ **Please forward the appraisal (less than 3 years old)*
➤ **NOTE: Jewelry you already have insured may have increased in value, please forward an updated appraisal.**
- Do you wish to insure collectibles such as antiques, guns, fine arts, stamps, coins, or baseball cards?
 No Yes >> *Please list* _____
- Have you made any improvements or additions to your home over the past few years that would have increased the replacement cost of your home? (ex. new addition, added central air, replaced the roof)
 No Yes >> *Please list* _____
- If you have installed a burglar alarm and would like credit on your homeowners, please forward a copy of the certificate.**
- Do you own tools or equipment used in your business?
 No Yes >> *Please describe* _____
- Are you running any business out of your home or giving private lessons on your premises?
 No Yes >> *Please describe* _____
- Do you baby-sit or provide daycare services from your home?
 No Yes >> *Please describe* _____
- Are you interested in flood or earthquake insurance for your home and personal property?**
 No Yes >> **We will contact you with a quote*
- Do you own a seasonal home or seasonal property?
 No Yes >> **Please forward a copy of your current declaration page & we will contact you with a free quote*
- Does our agency insure your vehicles?
 Yes **Please don't forget to fill out the auto review section on the other side of this page*
 No *Would you like a free quote?* _____ **If yes, please forward a copy of your declaration pg*
- Have you changed your mortgage company?
 Yes *1st / 2nd Bank* _____ *Loan Number* _____
Address _____
 No My 1st / 2nd mortgagee is now paid off
- If you were involved in an accident in your car or someone hurt themselves on your property and you were sued for \$1,000,000.00, where would you want the money to come from?
 I have it taken care of
 My insurance policy
 I don't know
➤ **NOTE: Umbrellas for \$1,000,000 start at \$150. For a free quote, fill out the information below:**
of Cars _____ *Residences* _____ *Boats* _____ *Drivers* _____
- Do you plan on adopting a dog, puppy, or exotic pet in the near future?
 No Yes >> **Please contact us before you adopt; some dog breeds may affect your insurance availability.*
- Is your dwelling vacant, for sale, or placed in a "trust" or "LLC"?
 No Yes >> *You need to notify us as soon as possible in order to maintain proper coverage*

Please turn over >>>

Automobile Annual Review

Please do not forget to fill out the Basic Information Section on the other side of this page.

- Have you acquired any new vehicles not listed on your policy?
 No Yes >> Leased / financed? Year _____ Make _____ Model _____
VIN _____
- Are all the licensed/permitted drivers in the household listed on your policy? **If yes, please disregard this section.*
 No **All licensed operators living in your household must be listed on your auto policy. Please list all licensed operators in your home other than yourself, below:*
Name _____ DOB _____ DL# _____
Name _____ DOB _____ DL# _____
Name _____ DOB _____ DL# _____

➤ **NOTE: Failure to list all licensed/permitted drivers in your household may give your auto insurance company the right to void your policy and/or deny a claim. If you have any concerns, please contact us immediately at 609-693-3123.**

- If there is a young driver in your household, there are some discounts available on your auto insurance. Please contact us to see if he or she qualifies. **Please note that additional documents may be needed in order to apply the discount.*
 - Have you changed jobs to one that would result in either an increase or decrease in the distance you drive?
 No Yes >> Please describe _____ How many more/less miles per day, 1 way _____
 - There may be special discounts available on your auto insurance if you have homeowners insurance with a certain company. Do you currently own a home or are purchasing a new home? **If no, please disregard this section*
 Yes, and you insure it
 Yes, but I am currently insured with (list current carrier) _____
Would you like a free quote? _____ **If yes, please forward a copy of your declaration page*
 - If you were involved in an at-fault accident on your way to work and there was a \$300,000.00 lawsuit, would you want your policy to pay the full amount?
 Yes It's not something I'm concerned about
- **NOTE: Umbrellas for \$1,000,000 start at \$150. For a free quote, fill out the information below:**
of Cars _____ Residences _____ Boats _____ Drivers _____

Policies with Other Companies?

In order to help you properly protect *all* your assets, it is important that we have complete information about all that you have to protect. Please list policies with OTHER agents and/or OTHER companies. Please also forward a copy of the declaration page(s).

Car Insurance Company _____ Renewal Date _____
Home Insurance Company _____ Renewal Date _____
Business Insurance Company _____ Renewal Date _____
Umbrella Insurance Company _____ Renewal Date _____
Boat/Recreational Vehicle Insurance Company _____ Renewal Date _____
Flood Insurance _____ Renewal Date _____

Please Contact Me About a Quote for the Following Products:

- | | | |
|---|---|---|
| <input type="checkbox"/> Home Insurance | <input type="checkbox"/> Flood Insurance | <input type="checkbox"/> Individual Health Insurance |
| <input type="checkbox"/> Auto Insurance | <input type="checkbox"/> Condo Insurance | <input type="checkbox"/> Business Insurance |
| <input type="checkbox"/> Renters Insurance | <input type="checkbox"/> Coastal Property Insurance | <input type="checkbox"/> Contractors Insurance |
| <input type="checkbox"/> Umbrella Insurance | <input type="checkbox"/> Life Insurance | <input type="checkbox"/> Commercial Auto Insurance |
| <input type="checkbox"/> Boat Insurance | <input type="checkbox"/> Group Health Insurance | <input type="checkbox"/> Workers Compensation Insurance |

Comments?
