## **Home Owners Insurance Quote**



	l out this form and either stop b	by or email it to us at info@kado	oinsurance.com
	ore and date of ontil		
		County:	
*Years at current address:	If less than 3 years, p	revious address:	
*Phone:	Cell #:		
Email:		*Preferred Contact Met	hod: Phone email
*Date of Birth:			
	• •	Frame Masonry Age of Furnace	
Type of HeatAge of Wiring	Circuit Brea	ker Fuses	
Distance to/name of respond Distance to Fire Hydrant # of Acres & Usage			
Dollar figure home is curren	atly insured for		
Liability Limit Deductible Requested	300,000 500,000 1,500 1,000 2,500 1,000 2,500 1,000	,000,000 ,500 5,000	
	Story 2 Story Finished	Bi-Level Walk-Out	
# of Bathrooms: Full _ Central Air	3/4	1/2	
Type of Flooring % Carpet Type of Siding	Lynol Tile _		
Woodburning Stove (Location # of Fireplaces & Type	on) Type	»:	
Garage: Attached Any Out Buildings:	Detached Size: 1 Car Dimensions:	2 Car 3 Car	
Swimming Pool YES Trampoline YES	NO Above Ground NO	: (Gated)	
Any Animals (Type & Breed Any Bite History Any Losses in the last 5 year Types of Losses Current Carrier & E Are you being non-r	rs	reason	
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