



#103 - 1177 WEST BROADWAY
 VANCOUVER, BC V6H 1G3
 TEL. 604-734-2288
 FAX. 604-734-7644
 TOLL FREE: 1-877-734-2288
 EMAIL: jordanc@chambersolsonltd.com

INSURANCE AUTO PERSONAL LINES COMMERCIAL LINES LIFE

HOMEOWNERS, CONDOMINIUM & TENANT QUOTATION FORM

Applicant/Contact Information

Insured 1: Date of Birth:

Insured 2: Date of Birth:

Mailing Address:

Risk Address:

Phone: Email:

Fax:

Policy Information Homeowners Condominium Tenants

Dwelling Value (homeowners): Year Built:
 Content Value (condo/tenants): Heating Type:
 Policy Deductible: Earthquake: Yes No
 Liability Limit:
 Scheduled Items:

Previous Ins Company: Policy Number:

Additional Discounts and Surcharges

Years Claims Free: 0 1 2 3 4 5 Additional Family: 1 2 3
 Alarm Discount: Monitored for Burglar Fire or Local 24 Hour Guard
 Wood Heat: Primary Secondary None Number of Mortgages:
 Lived at current residence for over 6 Years: Yes No Oil Tank: Yes No
 Fire Resistive: Yes No Sprinklers: Yes No Home Business: Yes No
 Soft Credit Check: Yes No Non-Smoker: Yes No

Claims History (please state any claims in the past 5 years):

For Homeowners, if home is over 25 years old we require updates of:

Roof: **Electrical:**

Heating: **Plumbing:**

**please note that this information is not required in order to provide a quote.*

Please Note: **We may require additional information to provide a quote.**