

**Marilyn Kuhlman Insurance**

7601 Main Street #100

Frisco, Texas 75034

972-335-2487

fax 972-335-2489

email info@marilynkuhlman.com

For a quick response please fax or call us with the following information.



**RENTERS QUOTE REQUEST**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Address of property to be insured \_\_\_\_\_

Do you have prior coverage? \_\_\_\_\_

Do you have any claims in the last 5 years? \_\_\_\_\_

Is this for a home or apartment? \_\_\_\_\_

Minimum coverage is \$25,000. What is the amount of coverage requested?

Home is: 1/2/3 Story                      1/2/3 Car Garage                      Attached/ Unattached  
or

Number of apartment units in your building? \_\_\_\_\_

Construction type? Brick \_\_\_\_\_ Frame \_\_\_\_\_ Stucco \_\_\_\_\_

What is the total living area? \_\_\_\_\_ Sq. Ft.

What year was house/apartment built? \_\_\_\_\_

Please check all that apply:

Deadbolts on exterior doors \_\_\_ smoke alarm \_\_\_ central burglar alarm \_\_\_

Non-smoker \_\_\_

**Underwriting uses a Consumer Report to derive discounts.**

**Do we have your permission to run this report? \_\_\_\_\_**

**Signature                      date**

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_