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HOMEOWNERS QUOTE SHEET

DATE: _____ COMPANY: _____
 AGENT: _____ AGENT#: _____ QUOTE: _____
 COMMENT: _____
 HOA: ☐ HOB: ☐
 POOL: Select DIVING BRD. ☐ FENCED/LOCKED: Select
 ALARM: Select FIRE: ☐ BURGLARY ☐
 UPDATES: Select WIRING: _____ PLUMBING: _____ CONST.: Select
 YEAR BUILT: _____ ROOF AGE _____ TYPE: Select _____ LAYERS: _____
 DIST. TO HYDRANT: _____ DIST. TO FIRE STATION: _____
 OPEN FOUNDATION: Select PROTECTED: ☐ UNPROTECTED ☐
 INSURED: _____ DOB _____
 STREET: _____
 CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____
 PRIOR COVERAGE: Select EXP DATE OF PRIOR COVERAGE: _____
 IF NO EXPLAIN: _____
 LOSSES: _____
 TYPE/AMT: _____

DEDUCTIBLES:

LIMITS

PREMIUM

DWELLING	_____	_____
CONTENTS	_____	_____
LIABILITY	_____	_____
MEDICAL	_____	_____
Residence Glass:	<input type="checkbox"/>	_____
Replacement Cost on Dwelling:	<input type="checkbox"/>	_____
Replacement Cost on Contents:	<input type="checkbox"/>	_____
Computer Coverage	<input type="checkbox"/>	_____
Identity Fraud Expense Coverage:	<input type="checkbox"/>	_____
Television & Radio Antenna Coverage:	<input type="checkbox"/>	_____
Accidental Discharge:	<input type="checkbox"/>	_____
No. of add. Premises Rented	_____	_____
to Others	_____	_____
SUBTOTAL:	_____	_____
POL FEE:	_____	_____
INSPECTION FEE:	_____	_____
TAX:	_____	_____
TOTAL:	_____	_____

D/P: _____
 FIN AMT: _____
 8 PAYMENTS: _____

APPLICATION MUST BE COMPLETE WITH PICTURES AND MONEY ATTACHED FOR BINDING.
 QUOTE SHEET ONLY. THIS IS NOT AN APPLICATION. NOT A FIRM QUOTE, FINAL PREMIUM SUBJECT TO VERIFICATION.
 QUOTE INCLUDES: TOTAL MOLD EXCLUSION AND WAR AND TERRORISM EXCLUSION.