



Home Owners Insurance Quote

Henslee Insurance Agency, Inc.

E-Mail

Date

Phone #

1st Named Insured:

DOB: Social Security #

2nd Named Insured:

DOB: Social Security #

Address including county and zip code:

Inside or outside the city limits:

of stories & construction (brick, frame, etc.)

Square Footage Year Built:

If Over 20 yrs old has there been any updates to wiring or plumbing if so what year?

Plumbing Electrical Water Heater A/C

Smoke alarms? Yes No Is Home Gas or Electric:

Does home have an alarm Y N Is it monitored Y N Deadbolts Y N
Fire Extinguisher Y N

Age and Type (comp, metal, etc) of roof: #of layers on roof

Fireplace: Gas or Wood: Wood burning stove?

Prior Carrier & Expiration Date

Renewal Premium:

Losses to any property in the past 5 years, including date, cause, and amount paid:

Occupation & Length of employment:

Financial Condition:

Any damage to property:

Swimming Pool: Above or below ground Fenced:

Diving board or slide: How deep: Self locking gate:

Trampoline:

Slab or Pier and Beam:

Any pets? If so what breed:

Any bite history

Number of acres owned # of cows, horses, goats, etc:

any ponds, tanks, creeks, etc:

of feet to fire hydrant: # of miles to fire department:

Dwelling value	\$	<input type="text"/>
Other structures	\$	<input type="text"/>
Liability	\$	<input type="text"/>
Deductible	\$	<input type="text"/>

Send completed form to hensleeinsurance@gmail.com or fax to (817)447-3743. You can call us at (817)447-2771

**Thank You For Your Submission We Will Get Back To
You Very Soon....**