



P: 403-678-5122

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Applicant Information:

Name(s) As appears on title of home: _____
 Mailing Address: _____ Postal Code: _____
 Email Address: _____ Phone Number: _____
 Birth Date (d) ____ (m) ____ (y) ____ Married Single How long have you lived at this address?: _____
 If less than 3 years previous address: _____

Insurance Information:

Have you had homeowners or tenants insurance in the past? Yes No Do you Smoke? Yes No
 Most recent insurance company _____ Date insurance last in force or is it current? _____
 Current Policy Number _____ Number of years continuously insured _____
 Current coverage limit (Cvg A: Dwelling building) \$ _____ Current policy expiry (dd/mm/yy) _____
 Primary Dwelling? Yes No Do you rent out any portion of your home? (i.e. basement suite, in-law suite) Yes No
 Liability limit required: \$1 million \$2 million other: _____ Deductible required: \$500 \$1,000
 Claims history - List claims made on any home/tenant insurance in the last 6 years and brief details:

 Are you or any member of your household a smoker? Yes No

Home Information:

Location Address (if different from mailing): _____ Postal Code: _____
 Year built _____ Building type: detached duplex triplex condo townhouse mobile home other _____
 Building construction: frame concrete log steel Outside wall covering: _____
 Roofing material: _____ Type of heat in home: _____ Square footage: (above grade) _____
 Year the following systems were last updated/upgraded/replaced:
 Roof _____ Plumbing _____ Hot Water Tank _____ Heating (furnace) _____ Electrical _____
 Do you have any of the following?
 Mortgage? Yes No Monitored fire/burglar alarm? Yes No
 Smoke detectors? Yes No Sprinkler system? Yes No
 Backwater Valve? Yes No Sump Pump? Yes No
 Water Sensors? Yes No If yes, how many? (water sensors) _____
 Fireplace? Yes No Wood stove? Yes No