



Personal insurance Exposure Questionnaire

We appreciate you trusting us by allowing us to service your insurance needs. Because we do not take your trust for granted, we do ongoing reviews to ensure we remain current with the protection you need. Please take a moment to complete the following questionnaire:

YOUR HOME:

- | | | |
|--|-----|----|
| 1. If we do not have your home insured, would you like to get a free quote? | Yes | No |
| 2. Have changes been made to deed/ownership of your home? (i.e., Trust or LLC) | Yes | No |
| 3. Have you refinanced or paid off your mortgage? | Yes | No |
| 4. Has Occupancy of home changed? | Yes | No |
| 5. Have you acquired or sold a vacation home / rental property? | Yes | No |
| 6. Have you built any additions onto your home or made any significant changes/renovations? | Yes | No |
| 7. Have you added a monitored fire/burglar system or Smart Home products? | Yes | No |
| 8. Have you replaced your roof in the past 10 years? If yes, what year? _____ | Yes | No |
| 9. Have you added any other structures or barns on your property? | Yes | No |
| 10. Have you acquired any jewelry that may require higher limits for theft on your policy? | Yes | No |
| 11. Have you acquired any valuable items that may require more comprehensive coverage? (i.e., cameras, collectibles) | Yes | No |
| 12. Are you interested in a quote for Flood Insurance? | Yes | No |

YOUR PERSONAL LIABILITY:

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|--|-----|----|
| 13. Does any household member own or operate a business in your home? | Yes | No |
| 14. Do you employ any full-time or part-time domestic staff or outside workers? (i.e., nanny or housekeeper) | Yes | No |
| 15. Have you acquired a dog? (If yes, include the breed in the comments) | Yes | No |
| 16. Do you have a trampoline or a pool with a slide or diving board? | Yes | No |
| 17. Are you interested in a quote for a Personal Umbrella Policy? | Yes | No |

FARM & RANCH

- | | | |
|--|-----|----|
| 18. Do you have outbuildings used for farm or ranch not listed on your policy? | Yes | No |
| 19. Have you purchased any farm equipment and/or implements that are not listed on your policy? | Yes | No |
| 20. Have you purchased any farm utility vehicles that are not listed on your policy? (i.d. mules, ATV's) | Yes | No |
| 21. Do you take your ATV's off property of any listed location on your policy? | Yes | No |
| 22. Have you purchased or leased an additional property for ranching or farming that are not listed on policy? | Yes | No |
| 23. Are you receiving any income for recreational use of your land? (i.e., hunting, fishing, camping) | Yes | No |
| 24. Do you have any farm employees? | Yes | No |

YOUR AUTOMOBILES:

- | | | |
|---|-----|----|
| 25. If we do not have your autos insured, would you like a quote for a potential companion policy discount? | Yes | No |
| 26. Do you have motorcycles, boats, RV's or classic cars you would like to have quoted? | Yes | No |
| If we do have your auto, please answer the following: | | |
| 27. Have you paid off a lien on a vehicle? | Yes | No |
| 28. Are there any new household members or any household members acquired a Driver's License in past 12 months? | Yes | No |
| 29. Are any vehicles owned, leased or titled in a name other than yours or your spouse's? | Yes | No |
| 30. Do any household members drive a company car? | Yes | No |
| 31. Are any vehicles garaged at a location other than your home? | Yes | No |
| 32. Has anyone in your household taken Defensive Driving in past 12 months that may qualify for a discount? | Yes | No |
| 33. Have you added an anti-theft system, sound system or additional equipment to any of your vehicles? | Yes | No |
| 34. If applicable, are you interested in a telematics discount program? | Yes | No |
| 35. Do you have any drivers in the household that may qualify for Good Student Discount? | Yes | No |

COMMERCIAL:

36. . Do you own a business or have business exposure you would like to get quotes for? Yes No

LIFE:

37. Are you interested in a Life Insurance Proposal for yourself or anyone in your family? Yes No

If you answered to "Yes" to any of these questions or if you would like to discuss other changes that may affect your personal property or Liability needs, please add comments, update your contact information and sign below. You may make changes to your policy at any time during the policy term.

Signed: _____ Date: _____ Phone: _____
Printed Name: _____ E-mail: _____

**Please return this form to our office by mail, scan and e-mail or even text it to us!
We are here to serve you!**

947 W Glade Rd, Hurst, TX 76054 817-479-7601 susan@shaw-insurance.net