

# FINCK & PERRAS INSURANCE AGENCY, INC

## HOMEOWNERS RENEWAL QUESTIONNAIRE

Please complete and return this questionnaire to our office at:

63 Main Street, Florence, MA 01060 or 6 Campus Lane, Easthampton, MA 01027

You may also complete and submit this questionnaire on our website at [www.InsuringYourWay.com](http://www.InsuringYourWay.com)

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NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

Does your home have an alarm system (other than smoke detectors or carbon monoxide detectors)?

*(You may be eligible for additional credits on your homeowners policy, please enclose a copy of the certificate of installation)*

Have there been any additions to your home in the past 3 years that have increased the square footage of your home including finishing a basement? \_\_\_\_\_

If yes, what kind \_\_\_\_\_  
*(These additions may affect the replacement cost of your home)*

Have you updated or replaced the following systems or items in your home:

Roof _____	Date Replaced _____
Electrical _____	Date Updated or Panel Replaced _____
Plumbing _____	Date Updated _____
Heating _____	Date Updated or Replaced _____

If you have oil heat, are you interested in Fuel Remediation Coverage? \_\_\_\_\_

Do you run any type of business out of your home? \_\_\_\_\_

*(Your liability coverage does not extend to any business activities and there is a limit on business personal property under your homeowners policy on and off premises)*

Do you have a pool? Above or inground? \_\_\_\_\_

Do you use a wood burning stove or pellet stove? \_\_\_\_\_

*(Certain companies require a questionnaire be filled out with information regarding the wood stove)*

Do you own any jewelry, furs or silverware valued over \$1000? \_\_\_\_\_

*(You can schedule this type of personal property for an additional premium)*

Are you interested in a personal umbrella policy that may protect your assets against lawsuits or judgments beyond the coverage provided under your homeowners and auto policies? \_\_\_\_\_

Please also provide us with your daytime phone number and evening number below so we may update our files:

Daytime: \_\_\_\_\_

Evening: \_\_\_\_\_

Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_