

Renter's Insurance Fact Finder
Email or Fax Completed Form
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Fax: 706-320-3848

General Information

Name:	Home Phone:			
Email:	Work Phone:			
Address:	City:	State:	Zip:	
Occupation:	Date of Birth:			

General Questions

Do you currently have a renter's insurance policy? ()Yes ()No			
If yes, who is your current carrier?	Expiration Date:			
Do you have any dogs? () Yes () No If yes, describe breed:				
Do you have an alarm system? () Yes () No				
Have you had any claims to your unit or personal property in the last five years? () Yes () No				
If Yes, please explain:				
Are there any additional residents in the household	? () Yes () No			
If yes, please provide names and relationship to you	:			

Coverage Information

What is the value of your personal belongings? ______

• Be sure to include ALL personal belongings. Use inventory list to assist in determining value.

Multi-Policy Discounts Available

Who currently writes your auto insurance? ______

Are you interested in an auto insurance quote? () Yes () No

Visit our Website at <u>www.cunninghaminsuranceinc.com</u> for additional sales tools.