



404 S Holland St #2 Wichita, Ks 67203 Phone: (316) 729-7676 Fax: (316)-729-8352

**Please fill out the entire form to receive an accurate Auto & Home Insurance Quote**

Name: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

Previous Address (if less than 6 months)

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Drivers License #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: (Circle One) Male / Female

Social Security Number: \_\_\_\_\_ Occupation: \_\_\_\_\_

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

Education Level: \_\_\_\_\_ Employment Status: \_\_\_\_\_

Age Licensed: \_\_\_\_\_ Licensed State: \_\_\_\_\_ Year's Licensed: \_\_\_\_\_

Current Insurance Carrier: \_\_\_\_\_ Expire Date: \_\_\_\_\_

Have you or your spouse had continued liability coverage for the past 6 mo.? \_\_\_\_\_

Prior Bodily Injury Limits: \_\_\_\_\_

Have you had any tickets or Accidents recently? Yes / No

If Yes, please explain:

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Do you receive a good student discount? Yes / No

Do you receive a defensive driver discount? Yes / No

How did you hear about our office? \_\_\_\_\_

Home type? House / Condo / Apartment / Mobile Home / Other \_\_\_\_\_

Do You? Own / Rent / Other \_\_\_\_\_

**Vehicle 1:**

**Make, Model and Year:** \_\_\_\_\_

**Principal Operator:** \_\_\_\_\_

**Vehicle Vin #:** \_\_\_\_\_

**Please Circle below**

**Vehicle Type: Private Passenger / Antique / Camping / Trailer / Classic / Motor Home**

**Pick-up / Replica / Travel Trailer / Utility Trailer / Van**

**Usage: Pleasure / Work / Business / Farm / Artisan**

**Miles to Work? (If use is work or school):** \_\_\_\_\_

**Annual Miles? (If not for work or school):** \_\_\_\_\_

**Vehicle 2:**

**Make, Model and Year:** \_\_\_\_\_

**Principal Operator:** \_\_\_\_\_

**Vehicle Vin #:** \_\_\_\_\_

**Please Circle below**

**Vehicle Type: Private Passenger / Antique / Camping / Trailer / Classic / Motor Home**

**Pick-up / Replica / Travel Trailer / Utility Trailer / Van**

**Usage: Pleasure / Work / Business / Farm / Artisan**

**Miles to Work? (If use is work or school):** \_\_\_\_\_

**Annual Miles? (If not for work or school):** \_\_\_\_\_

**Vehicle 3:**

**Make, Model and Year:** \_\_\_\_\_

**Principal Operator:** \_\_\_\_\_

**Vehicle Vin #:** \_\_\_\_\_

**Please Circle below**

**Vehicle Type: Private Passenger / Antique / Camping / Trailer / Classic / Motor Home**

**Pick-up / Replica / Travel Trailer / Utility Trailer / Van**

**Usage: Pleasure / Work / Business / Farm / Artisan**

**Miles to Work? (If use is work or school):** \_\_\_\_\_

**Annual Miles? (If not for work or school):** \_\_\_\_\_

**Vehicle 4:**

**Make, Model and Year:** \_\_\_\_\_

**Principal Operator:** \_\_\_\_\_

**Vehicle Vin #:** \_\_\_\_\_

**Please Circle below**

**Vehicle Type: Private Passenger / Antique / Camping / Trailer / Classic / Motor Home**

**Pick-up / Replica / Travel Trailer / Utility Trailer / Van**

**Usage: Pleasure / Work / Business / Farm / Artisan**

**Miles to Work? (If use is work or school):** \_\_\_\_\_

**Annual Miles? (If not for work or school):** \_\_\_\_\_

**Spouse Information**

Name: \_\_\_\_\_

Drivers License #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: (Circle One) Male / Female

Social Security Number: \_\_\_\_\_ Occupation: \_\_\_\_\_

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

Education Level: \_\_\_\_\_ Employment Status: \_\_\_\_\_

Age Licensed: \_\_\_\_\_ Licensed State: \_\_\_\_\_ Year's Licensed: \_\_\_\_\_

Current Insurance Carrier: \_\_\_\_\_ Expire Date: \_\_\_\_\_

Has spouse had any tickets or Accidents recently? Yes / No

If Yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does spouse receive a good student discount? Yes / No

Does spouse receive a defensive driver discount? Yes / No

**Child 1 Driver Information**

Name: \_\_\_\_\_

Permit or Drivers License #: \_\_\_\_\_ Social Security# \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: (Circle One) Male / Female

Full-time Student Yes / No      Education Level: \_\_\_\_\_

Age Licensed: \_\_\_\_\_ Licensed State: \_\_\_\_\_ Year's Licensed: \_\_\_\_\_

Has Child 1 had any tickets or Accidents recently? Yes / No

If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Does child 1 receive a good student discount? Yes / No

Does child 1 receive a defensive driver discount? Yes / No

**Child 2 Driver Information**

Name: \_\_\_\_\_

Permit or Drivers License #: \_\_\_\_\_ Social Security# \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: (Circle One) Male / Female

Full-time Student Yes / No      Education Level: \_\_\_\_\_

Age Licensed: \_\_\_\_\_ Licensed State: \_\_\_\_\_ Year's Licensed: \_\_\_\_\_

Has Child 2 had any tickets or Accidents recently? Yes / No

If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Does child 2 receive a good student discount? Yes / No

Does child 2 receive a defensive driver discount? Yes / No

**Please fill out the form to receive an accurate Home Insurance Quote:**

What is the replacement cost of your home? \_\_\_\_\_

What is your current deductible? \_\_\_\_\_

Who is your mortgage company? \_\_\_\_\_

What year was your home built? \_\_\_\_\_

What is the square footage? \_\_\_\_\_

How many stories is your home? \_\_\_\_\_

Do you have a garage? Yes / No      Do you have a basement? Yes / No

What is the height of your ceiling? \_\_\_\_\_

How many Bathrooms are in your home? \_\_\_\_\_

How many fireplaces are in your home? \_\_\_\_\_

Does your home have a Jacuzzi, Hot Tub or Pool? Yes / No

If Yes, which one's? \_\_\_\_\_

Does your home have a deck or porch? Yes / No

If yes, which one's and what level are they on? Give Estimated Sq. Ft. of each one

\_\_\_\_\_  
\_\_\_\_\_

Are there any separate structures? Yes / No

If yes, what is the structure and how is it used?

\_\_\_\_\_  
\_\_\_\_\_

Does your home have? Heating and Cooling / Central Heat and Air / Heat only

Is the heating Gas or Electric? \_\_\_\_\_

Have you replaced your electric / plumbing / heating anytime recently? Yes / No

If yes, which ones and when?

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Have you upgraded any bathrooms or kitchens recently or are they all builders grade?

Answer below please, if upgraded, which rooms and what year was this completed?

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Have you had your roof replaced in the last 10 years? Yes / No

If yes, what year? \_\_\_\_\_

How many feet to the closest fire hydrant from your home? \_\_\_\_\_

Do you have a pet? Yes / No what kind? \_\_\_\_\_

Do you have a fenced in yard? Yes / No

If yes what kind of fence? \_\_\_\_\_

Do you have a trampoline or skateboard ramp? Yes / No

If yes, which one(s) \_\_\_\_\_

Does your trampoline have a safety net around it? Yes / No

Thank You for completing,

Design Benefits LLC

