

QUESTIONS FOR MOBILE HOME/TRAILER QUOTE

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

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

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

DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

Year Built: \_\_\_\_\_

Type of foundation: Tied down? Blocks? \_\_\_\_\_

Make/Model: \_\_\_\_\_

Serial # / ID #: \_\_\_\_\_

Length/Width: \_\_\_\_\_ X \_\_\_\_\_

Value: \$ \_\_\_\_\_

Contents Value: \$ \_\_\_\_\_

Type of coverage: \_\_\_\_\_