



# American Tejas Insurance Services

AGENT: American Tejas Insurance Services  
233 Sherry Lane  
Burleson, TX 76028  
817-426-5100 Phone  
sales@atjis.com

## Homeowner Insurance

Applicant's Name: \_\_\_\_\_ PROPOSED EFFECTIVE DATE:  
Mailing Address: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ 12:01 A.M. Standard Time at the address of the Applicant  
Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
County: \_\_\_\_\_ Fax: \_\_\_\_\_  
**APPLICANT** Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Occupation: \_\_\_\_\_ How long at current job? \_\_\_\_\_  
**SPOUSE** Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

## CURRENT INSURANCE INFORMATION

Company Name (not agency): \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Years insured: \_\_\_\_\_  
Premium Amount: \$ \_\_\_\_\_ Term: ☐ 6 Months ☐ 1 Year ☐ Other \_\_\_\_\_ Amount Insured For: \$ \_\_\_\_\_

## HOME INFORMATION

How Long At Present Address: \_\_\_\_\_ Year Home Was Built: \_\_\_\_\_  
Sq. Footage (excluding garage and basement): \_\_\_\_\_ sq. ft. Number of Claims In Last 3 Years: \_\_\_\_\_

## STRUCTURE INFORMATION

Type: ☐ 1 Story ☐ 1 1/2 Story ☐ 2 Story ☐ Split Level ☐ Bi-Level ☐ Other \_\_\_\_\_  
Construction: ☐ Frame ☐ Stucco ☐ Veneer ☐ Masonry ☐ Other \_\_\_\_\_  
Roof: ☐ Asphalt ☐ Shingle ☐ Wood ☐ Shingle ☐ Tile ☐ Slate ☐ Other \_\_\_\_\_ Age of Roof: \_\_\_\_\_ years  
Foundation: ☐ Basement ☐ Crawl ☐ Space ☐ Slab ☐ Other \_\_\_\_\_  
Garage: ☐ 1 Car ☐ 2 Car ☐ 3 Car ☐ 4 Car ☐ None  
☐ Attached ☐ Detached ☐ Basement ☐ Built-in ☐ Car Port ☐ None

## FEATURES

Bathrooms: # of Full: \_\_\_\_\_ # of Half: \_\_\_\_\_  
Basement: ☐ None ☐ Finished ☐ Unfinished Sq. Ft.: \_\_\_\_\_  
Deck/Porch/Patio: Deck Sq. Ft.: \_\_\_\_\_ Porch Sq. Ft.: \_\_\_\_\_ Screened Patio Sq. Ft.: \_\_\_\_\_  
Fireplaces: # of Chimneys: \_\_\_\_\_ # of Hearths: \_\_\_\_\_  
Heating System: ☐ None ☐ Electric ☐ Gas ☐ Oil ☐ Propane ☐ Solar ☐ Other  
☐ Central Air ☐ Central Vac  
Security Alarm: ☐ None ☐ Monitored ☐ Not Monitored  
Fire Alarm: ☐ None ☐ Monitored ☐ Not Monitored  
☐ Smoke Detector

Please give any additional comments you feel appropriate for this quotation. If you have additional information where there was not enough room above, please enter them here. \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_