



ALWAYS FAITHFUL INSURANCE AGENCY

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CA Broker License #4476212 | NPN #21686200 | Licensed P&C Broker in 21 States

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California Certified Disabled Veteran Business Enterprise & Small Business #2045250

HOMEOWNERS INSURANCE APPLICATION

Please do not write Social Security numbers, driver's license numbers or bank account numbers on this form. If we need them to quote or bind, we will collect them by phone or through a secure link.

APPLICANT

Named Insured(s):

Mailing Address:

City: State: ZIP: Phone:

Email: Best time to call:

Date of Birth (primary): Occupation: Desired Effective Date:

Co-applicant / Spouse Name: Co-applicant Date of Birth:

PROPERTY

Property Address (if different from mailing):

City: ZIP: County:

How is the home used? ☐ Primary home ☐ Secondary / vacation ☐ Rented to others ☐ Vacant ☐ Under construction

Dwelling type ☐ Single family ☐ Condo ☐ Townhome ☐ Manufactured / mobile ☐ 2-4 units

Year Built: Square Feet (living): Stories: Bedrooms: Bathrooms:

Purchase Date: Purchase Price: Estimated Rebuild Cost (if known):

Exterior construction ☐ Wood frame ☐ Stucco over frame ☐ Masonry / block ☐ Brick veneer ☐ Other

Foundation ☐ Slab ☐ Raised / crawlspace ☐ Basement ☐ Hillside / pier ☐ Other

Garage ☐ None ☐ Attached 1-car ☐ Attached 2-car ☐ Attached 3+ ☐ Detached

Is the home in an HOA or gated community? ☐ Yes ☐ No

HOA name (condo / townhome: is the building insured by the HOA?):

ROOF AND UPDATES

Roof material ☐ Composition shingle ☐ Concrete / clay tile ☐ Metal ☐ Wood shake ☐ Flat / other

Year roof installed or replaced: Roof condition:

System updates (year last replaced or fully updated)

	Electrical	Plumbing	Heating / AC	Water Heater
1				

Electrical panel type ☐ Breakers ☐ Fuses ☐ Federal Pacific / Zinsco ☐ Don't know

Plumbing pipe material ☐ Copper ☐ PEX ☐ CPVC / PVC ☐ Galvanized ☐ Polybutylene ☐ Don't know

Primary heating ☐ Central gas ☐ Electric / heat pump ☐ Wood stove / fireplace insert ☐ Other

Are there any solar panels on the property? ☐ No ☐ Owned ☐ Leased / PPA



PROTECTION AND HAZARDS

Protective devices (check all that apply):

- | | | |
|---|---|--|
| ☐ Smoke detectors | ☐ Central-station fire alarm | ☐ Central-station burglar alarm |
| ☐ Fire sprinklers | ☐ Deadbolts | ☐ Water leak / shut-off device |
| ☐ Gas shut-off valve | ☐ Monitored camera system | ☐ Gated community |

Distance to nearest fire hydrant (feet): Distance to fire station (miles):

Is there a swimming pool, spa or pond? ☐ No ☐ Pool - fenced ☐ Pool - not fenced ☐ Spa only

Diving board or slide? Describe:

Is there a trampoline, skate ramp or similar on the property? ☐ Yes ☐ No

Are there any dogs or other animals at the home? ☐ Yes ☐ No

Breed(s) and any bite history:

Is any business run from the home, or do customers come to the home? ☐ Yes ☐ No

If yes, describe:

Is any part of the home rented out, including short-term rentals (Airbnb, VRBO)? ☐ Yes ☐ No

If yes, describe:

Does anyone in the household have a home day care, or keep horses or livestock? ☐ Yes ☐ No

Is the home vacant, being renovated, or unoccupied more than 30 days in a row? ☐ Yes ☐ No

If yes, explain:

WILDFIRE MITIGATION (CALIFORNIA SAFER FROM WILDFIRES)

Carriers in California must recognize certain wildfire mitigation. Check what applies so we can ask for every credit you have earned.

- | | |
|---|---|
| ☐ Class A fire-rated roof | ☐ Ember- and fire-resistant vents |
| ☐ Enclosed eaves | ☐ 6 inches of non-combustible siding at the ground |
| ☐ Multi-pane or tempered windows | ☐ 0-5 ft cleared of combustibles (Zone 0) |
| ☐ Defensible space cleared to 100 ft | ☐ Firewise USA / Fire Risk Reduction community |
| ☐ Shelter-in-place community | |

Has the home received a wildfire inspection or a non-renewal tied to wildfire risk? ☐ Yes ☐ No

If yes, date and what was required:

HOUSEHOLD AND CLAIMS

People living in the home: Children under 14: Household members 14 and older:

Losses or claims at ANY property you have owned or rented, last 5 years (include water and wind claims)

#	Date	Type (water, fire, theft, liability, wind, other)	Amount Paid	Property Address	Repaired? Y/N
1					
2					
3					
4					



COVERAGE REQUESTED

Dwelling (Coverage A) \$: Personal Property \$: Other Structures \$:
Personal liability ☐ \$300,000 ☐ \$500,000 ☐ \$1,000,000 ☐ Match current
All-perils deductible ☐ \$1,000 ☐ \$2,500 ☐ \$5,000 ☐ \$10,000
Also quote:
☐ Earthquake ☐ Flood ☐ Scheduled jewelry / valuables
☐ Water backup / sewer ☐ Umbrella ☐ Bundle with auto
Mortgage Company / Lender: Loan Number:

CURRENT INSURANCE

Current Insurance Company: Policy Expires:
Has any insurance company canceled, non-renewed or declined this property in the last 3 years? ☐ Yes ☐ No
If yes, company, date and reason:
Has coverage lapsed (gone without insurance) at any time in the last 3 years? ☐ Yes ☐ No
Attach your current declarations page if you have one; it is the fastest way for us to match or beat your coverage.
Is the home currently insured through the California FAIR Plan? ☐ Yes ☐ No
If yes, is there a difference-in-conditions (DIC) policy with it? Company:
Anything else we should know about the home (recent remodels, additions, known issues):

APPLICANT SIGNATURE

Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

The undersigned states that the information provided in this application is true and complete to the best of their knowledge, and authorizes Always Faithful Insurance Agency to submit it to insurance companies for the purpose of obtaining quotations. Submitting this form does not bind coverage; coverage begins only when confirmed in writing by the agency or the insurance company.

Printed Name: Title (if business):

Signature: Date:

Sign by typing your name in the signature box, signing with your PDF reader's Fill & Sign tool, or printing and signing by hand. Email the completed form to info@semperfiservicesolutions.com or call 650-489-2592.