



## Homeowners New Business Checklist

Client's Name:

Location:

Client's Phone Number:

Specific occupation information for all named insureds:

If a business owner, please provide the name of company, what service company provides and position in the company.

Client's Date of Birth:

Does the client have, or in the past had any insurance coverage with Chubb?

Who will occupy this residence? (owner or tenant occupancy?)

Is the risk a one - family dwelling or multi-family residence?

Who is the current insurance carrier?

Why is the insured shopping for coverage at this time?

Any prior cancellation for nonpay or non renewal?

If home is a new purchase, when will the insured move into the residence?

Does the client have any plans for renovations/updates to this home in the next 12 months?

If yes, please describe.

What year was this home built?

If the home is over 30 years old, please list the most recent updates to heating, plumbing, electrical and roof.

Is the home located within 5 miles of the first responding fire department?

Is the home within 1000 feet of a hydrant?

What is the date & dollar amount of losses that have occurred at this home?

What was the cause of loss, and has it been mitigated?



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Is there any business or farming conducted on the premises?

What amount of dwelling & contents are needed for this location?

Is there a mortgage on this home?

Does the client have a central station fire and/or burglar alarm system?

Is this home in a gated community?

What is the construction type of the dwelling, i.e. materials on the exterior of dwelling?

Is any part of the home EIFS (Exterior Insulated Finishing System)? If so is it water managed?

How many floors are there for this home?

Does the insured employ any domestic staff?

[For homes located in catastrophe prone areas:](#)

Does the client have other business, not prone to catastrophe loss that can be written?

What floodzone is the risk in?

If flood zone A, can you provide an elevation certificate less than 10 years old?

Does the home have at least 150 ft clearance from brush in all directions?

What is the distance to coastal waters?

What type of material is the roof ?

When was the roof last replaced?



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### Optional Coverage Endorsements:

Would the client like Family Protection coverage?(where available)

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Would the client like additional mold remediation coverage?

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Would the client like earthquake coverage?

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Does the insured own Valuable Articles, i.e. jewelry, fine arts, etc.?

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Does the insured need higher limits of Personal Liability coverage?

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### Additional Interests/Trusts or LLC's:

Who are the owners/members of the trust or LLC?

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What is the purpose of the trust or LLC?

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Does the trust or LLC own any other properties?

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Does the trust or LLC have any tenants?

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Is the trust or LLC involved in business?

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Please list the full name and address of the trust or LLC.

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### For Secondary residential locations:

If liability needs to extend to any other locations please provide the following:

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What is the full address?

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Who occupies the dwelling?

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If rented, is it rented on an annual or monthly basis?

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Where is this secondary home currently insured?

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Is the risk a single family home? If not please provide the type of dwelling?

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## Homeowners New Business Checklist

### Does the risk qualify for any of the following discounts?

**Water leak detection and control system having a U.L. Master Label.** The system must monitor all areas containing plumbing devices and outlets. In the event of a leak, this system must \* close the master plumbing valve; or close the master plumbing valve and activate a central station or direct alarm.

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**Lightning protection system** having a U.L. Master Label and installed by a certified Lightning Protection Institute installer. The system must include lightning rods and lightning arresters protecting the electrical wiring and all electronic devices of the entire house.

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**Gated Community Patrol** -if the house is in a gated community and has a fire and burglar alarm that when activated, alerts the community's 24-hour patrol service to dispatch a guard to the residence.

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**Security protection for the entire external perimeter of the house**

consisting of any one or more of the following:

- closed circuit TV cameras monitored 24 hours a day;
  - detection system, external to the residence which is motion activated and monitored 24 hours per day;
  - 24 hour on site security guard.
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**Sprinkler system water flow alarm** which activates a central station or direct alarm

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**Back-up generator**, permanently installed, electrical power back-up generator capable of servicing heat, light, alarm and sprinkler systems.

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**Automatic seismic shut-off valve** to gas lines which activates automatically in the event of an earthquake.

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**Full time caretaker** who lives at the residence year round. This credit applies only if a 24 hour on site security guard is not present.

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**\*\*Copy of central station alarm certificates are typically required within 30 days of policy issuance.**