## Snyder Insurance Services, Inc. 7450 W. 130<sup>th</sup> Street – Suite 230, Overland Park, KS 66213 1-800-874-6704 Fax 913-498-0212

## REQUEST FOR RENTERS INSURANCE PROPOSAL

Name			Home #	Home #		
Street Address			Work#			
City/State/Zip	Email:	Email:				
Birth Date: (Insured)	Social Sec	Social Security #				
Birth Date: (Other Insured)			Social Security #			
Current Insurance Info	rmation (Che	ck here if no	one 🗆 )			
Current Company	Policy #				Expiration Date:	
Current Coverage Info	rmation			•		
Dwelling Limit: N/A		Personal Property:				
Liability:			Deductible:			
List any Scheduled Items and	insured amour	nts (ie: jewel	ry, cameras,	guns,	silverware, computers)	
Optional Coverage included (	ie: sewer back	cup, earthqua	ke)			
Remarks:						
Claims: Have you had	any claims wi	thin the last	3 years? □ Y	es 🗆 N	No (If yes, list below)	
Date Type of Loss (ie: Hail/1			l/fire)	re) Amount Paid		
<b>Building Information</b>						
Year Built	Purc	Purchase Price N		Purch	nase Date N/A	
Construction Material  Brick Rock/Stone Frame Stu			□Other	Central Security Alarm ☐ Yes ☐ No		
Apartment   Townhouse	Condo □					

## **Landlord Information (If required to send proof of coverage)**

Name of Landlord		
Mailing Address		
City/StateZip		