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**EXCALIBUR NATIONAL INSURANCE COMPANY - QUICK QUOTE SHEET**

AGENCY ID		DATE		PARISH	
EFF DATE		HOME \$		YR BUILT	PERS/LIAB

**APPLICANT INFORMATION**

Last Name				First	
DOB		SSN#		Credit Score/Occupation	
Phone			Email		Retire/55+

**CO-APPLICANT INFORMATION**

Last Name				First	
DOB		SSN#		Credit Score/Occupation	
Phone			Email		Retire/55+

**PROPERTY DESCRIPTION - Occupied by the Above Applicant(s) ONLY**

ADDRESS				PARISH		TERRITORY	
CITY			LA	ZIP		SQ FEET	
CONST TYPE		# STORIES		FOUNDATION TYPE		FT RAISED	
ROOF TYPE			ROOF MATERIALS			YEAR	
DETACHED GARAGE		FLAT ROOF		WHERE ?			
COVERED/PATIO/PORCH		UNATTACH STRUCTURES		WHERE ?			
FUSE BOX		WIRING		PLUMBING		FIREPLACE	
NEW POLICY		FIRE ALARM		CENTRAL REPORTING		PROOF	
OWNER 55+		BUR ALARM		CENTRAL REPORTING		PROOF	
SECURED COMMUNITY		PROTECTIVE PACKAGE		HURRICANE SHUTTERS			
BUSINESS PROPERTY - INCREASE LIMITS			WATER BACKUP & SUMP DISCHARGE AMOUNT				

**GENERAL INFORMATION**

NEW PURCH		PURCH/DATE		LOCATED ON MORE THAN 1 Acre			
TRAMPOL.		DOG		BREED		BITE HIST.	
POOL		DIVE BOARD		SLIDE		FENCE/LOCKING GATE	
DAYCARE		OTHER BUSINESS		DESCRIBE			

**LOSS INFORMATION - HOMEOWNERS - FLOOD**

PRIOR HOME CARRIER							
ANY LOSS PAST 5 YEARS		LOSS DATE		LOSS TYPE		AMOUNT	
FLOOD CARRIER					EFF DATE		
EVER FLOODED		WHEN?		LOSS AMNT			
NEED FLOOD		FLOOD ZONE		FLOOD LIMIT			
AGENT NAME					DATE		