

UNITY MUTUAL INSURANCE / HOBBY & FARM OWNERS QUICK QUOTE SHEET:

Name: _____ EFF: DATE: _____ County: _____

Address: _____ Year Built: _____

Agency: _____ Agent: _____ Ram or North Star Auto Credit: Yes / No

Ded/Circle 500 1000 1500 2000 2500 3000 5000 10,000 25,000 Miles From Fire Dept. _____

Year Updated: Roof _____ Heating _____ Electrical _____ All the old wiring must be removed and replaced.

Wood Heat: Yes No Masonary Fireplace: Y / N - Other: Y / N - Outdoor, Distance To Closest Bldg: _____ ft.

A1 Dwelling Coverage _____ Basic ___ Broad ___ Special ___ Replacement Household P.P. Yes No

A2 Dwelling Coverage _____ Basic ___ Broad ___ Personal Prop. Amt. _____ Addl. Living _____

Farm Property: Scheduled Total _____ Unscheduled Total _____ Cab Glass # of Units _____

G1 Metal Roofs # _____ Total Cov _____ G1 Metal Roofs W/Cosmetic Excl # _____ Total Cov _____

G1 Steel Bins # _____ Total Cov _____ G1 Steel Bins W/Cosmetic Excl # _____ Total Coverage _____

G1 Silos # _____ Total Cov _____ **Note:N.S.Only G1S for Shingles less than 10 yrs & Open Sided Bldg**

G1S # _____ Total Cov _____ **G1S** Metal Roofs W/Cosmetic Excl # _____ Total Cov _____

G2 Metal Roofs # _____ Total Cov _____ G2 Metal Roofs W/Cosmetic Excl # _____ Total Cov _____

G2 Steel Bins # _____ Total Cov _____ G2 Steel Bins W/Cosmetic Excl # _____ Total Coverage _____

G2 Silos # _____ Total Cov _____ **Note:N.S.Only G2S for Shingles 25 yrs or less & Open Sided Bldg**

G2S # _____ Total Cov _____ **G2S** Metal Roofs W/Cosmetic Excl # _____ Total Cov _____

G3 Metal Roofs # _____ Total Cov _____ G3 Metal Roofs W/Cosmetic Excl # _____ Total Cov _____

G3 Steel Bins # _____ Total Cov _____ G3 Steel Bins W/Cosmetic Excl # _____ Total Coverage _____

G3 Silos # _____ Total Cov _____ **Class H: Special Hazard & Portable Buildings** # _____ Total Cov _____

CPL / FCPL # Of Acres _____ **Non-Farm Cr. Y / N Liability Limit** _____ **Med Pay** _____

Livestock: Y / N # _____ Horses Y / N # _____ Trampoline Y / N Swimming Pool Y / N (No Diving Bds/Slide)

Recreational RV Liab: Y / N Watercraft Liab. Over 50 hp Y / N HP _____ Fire Dept. Coverage _____

INLAND MARINE: Jewelry, ATV's, Boats, Other. List Items, Coverage & Deductibles. _____
