

# The Southern General Agency of Tennessee, Inc.

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## Dwelling EARTHQUAKE Application

Applicant's Name	_____
	_____
Mailing Address	_____
	_____
Phone	_____

Agent Name	_____
Address	_____
	_____
Phone	_____

REQUEST FOR:     QUOTE                       BIND  
 Eff Date: From \_\_\_\_\_ To \_\_\_\_\_

1. **Applicant is:**    Individual    Corporation    Partnership    Joint Venture    Other (Specify): \_\_\_\_\_
2. **Occupancy:**    Owner         Tenant         Secondary    Seasonal         Other (Specify): \_\_\_\_\_
3. Protection Class: \_\_\_\_\_ Year Built: \_\_\_\_\_ Number of Stories: \_\_\_\_\_ Total Square Feet: \_\_\_\_\_
4. Dwelling Updates Year: Wiring: \_\_\_\_\_ Heating: \_\_\_\_\_ Plumbing: \_\_\_\_\_ Roof: \_\_\_\_\_
5. **Is Dwelling built on Firm, Natural Ground:**    Yes    No (if No, cannot Quote/Bind)

### PROPERTY INFORMATION SECTION

Loc	Street, City, State, Zip Code	County	Part Occupied

Loc	Mortgagee or Loss Payee:	Loan #:

Causes of Loss: **Earthquake Only**

### COVERAGE INFORMATION

Valuation: **ACV**

Deductible: **10%**

Replacement Cost if applicable

Exposure	Amount Requested		Construction	CHECK ONE
A. Dwelling	\$	SUBMIT FOR QUOTE	Frame	
B. Other Structures**	\$		Masonry / Brick Veneer	
C. Personal Property	\$		Solid Masonry	
D. Rental Value	\$		Non-Combustible	
E. Add'l Living Exp	\$		All Other - Describe	
<b>TOTAL VALUES:</b>				
\$				
<b>If Other Structures Requested – <u>**Please Describe:**</u></b> <b>\$400.00 Minimum Premium</b>				

This application **Does Not Bind YOU nor US** to complete the insurance, but it is agreed that the information contained herein shall be the basis of the contract should a policy be issued.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRODUCER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_