



Overnight rental Insurance Quote Request Form

Owners Name:

Occupation:

Dates of Birth:

Mailing Address:

City: State: Zip Code:

Phone E-mail Address:

Chalet/Property address with City, State and Zip Code :

Replacement of Chalet/Property/What are you paying for it:

Value of Contents:

Your Estimated Annual Rental Income: Year the Chalet/Building was built:

Square Footage: Construction Type Roof Type and Year updated

Fireplace: Number of Floors: Number of Bedrooms:

Number of Bathrooms: Number of people it sleeps:

Minimum age rented to:

Improvement dates: Roof Heating/Air Plumbing

Other major improvements/date:

Central Station/Security: Burglar Alarm: Fire Alarm : Water shut off:

Camera System:

Does it have a sprinkler system:

Do you have a pool What type of enclosure is around it

Management company: Chalet Name or VRBO/AirBNB #

Do you have a Mortgage:

Current Carrier Do you have any losses (please explain)

Continue for Loss information: Date of renewal/closing

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